



Application

Applicant Name: _____

Nickname: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____ Fax: _____

Business Email: _____

Personal Information

Date of Birth (mm/dd/yyyy): _____

Citizenship: United States Citizen Not a United States Citizen
 Colorado Citizen, if no then what State _____

Have you ever been convicted of a felony? No Yes

Gender: Male Female

Marital Status: Married Single Divorced Separated

Spouse's/ Significant Other's Full Name: _____

Spouse's Number: _____ Spouse's Email: _____

Children (name, age, if applicable): _____

* Your spouse or significant other will be required to return a "Spousal Support" form, provided to you by the CALP office upon receipt of your application. This will need to be returned by Sept. 18, 2024. Due to the required 100% attendance requirement, CALP feels it is important a spouse or significant other be aware and supportive of your application.



EDUCATION INFORMATION

High School attended and year graduated: _____

College/ Trade School Attended: _____

Degree Earned and Year Graduated: _____

Additional Degrees and Education: _____

BUSINESS/OCCUPATIONAL INFORMATION

Company, Farm or Ranch Name: _____

Commodities/Service/Products Provided: _____

Current Position/Title: _____

Boss, Manager, or Supervisor Name: _____

Boss, Manager, or Supervisor email: _____

Business Address:

Address: _____

City: _____ State: _____ Zip: _____

AGRICULTURE PRODUCTION EXPERIENCE (if applicable)

Rank commodities produced in order of predominance
Please detail your full-time or part-time production (farming, ranching, managing)
agricultural experience and operation size.



Current Occupation/Duties/Responsibilities: _____

Other Occupational Experience or Comments: _____

**AGRI-BUSINESS WORK EXPERIENCE
(if applicable)**

Please detail any non-production or agribusiness experiences related to agriculture (e.g., agchemicals, ag-education, ag-sales, etc.) List most recent first.

Dates Employed _____

Company _____

Location _____

Type of Business _____

Position _____

* You will be required to submit an "Employer Commitment" Form, provided by the CALP Office upon receipt of your application. This form must be completed by your employer, or yourself if you are self-employed, and submitted back to the office by Sept. 18, 2024.

ORGANIZATION AND COMMUNITY EXPERIENCE



Indicate your past and current membership and offices held in organizations, including college and technical institute, agricultural, civic, church, governmental and military. (Include only last 8 years.)

Organization _____

Dates of Membership _____

Offices Held/ Committees/Responsibility _____

List awards and honors you have received _____

PERSONAL INTERESTS

List three books, articles, movies, people or speakers that have given you useful insights during the past year.

Briefly describe your foreign travel, if any. Indicate countries visited, travel dates and purpose of travel.

Country Visited _____

Travel Dates _____

Purpose _____

Name the three best times of the year (in order of preference) for you/your family/operation for you to be away at a 10–14-day international study seminar. List month names.

(1st) _____

(2nd) _____

(3rd) _____



COLORADO AGRICULTURAL LEADERSHIP PROGRAM

**Application Agreement Form
Class XVII 2025 - 2027**

The CALP program is a huge commitment of time. My signature below indicates my willingness to make the commitment of full participation and attendance.

Furthermore, I agree that once any tuition fees have been paid, there is no refund, full or partial.

Applicant's Signature

Date

This page must be returned with the application.

**Email to:
Dani@coloagleaders.org**

**Mail to:
Colorado Agricultural Leadership Program
PO Box 1183
Cortez, CO 81321**

Recommendations:

Upon receipt of your application, you will be asked to submit the following by no later than Sept 18, 2024. A minimum of three (3) recommendations (form will be provided by CALP office) by September 18, 2024. All replies are confidential. An Employer Commitment form and a spousal support form, if applicable.