



Applications will be reviewed as received and accepted until February 9, 2024. Please note that admission is competitive. Space is limited. Please submit your application **online** as soon as possible for the best opportunity to be accepted.

There are a series of long form questions with character limits on the online application. Before beginning, we recommend that you review the application questions. You can [download a list of questions here](#). We suggest you download, complete, and save this document with your answers to your computer in advance of starting the online application to avoid loss of work.

If you have any issues submitting your application, please contact Kabrella Clark at kclark@cincinnatiachamber.com.

Name *

First Name

Last Name

Primary Email Address *

example@example.com

Primary Phone Number *

Please enter a valid phone number.

Secondary Phone Number

Please enter a valid phone number.

Home Address *

Street Address

Street Address Line 2

City

State / Province

Postal / Zip Code

Race/Ethnicity

American Indian or Alaska Native
Asian
Black or African American
Hispanic or Latino
Native Hawaiian or Other Pacific Islander
White
Other

Gender

| | |
|------------|---------------------|
| Female | Male |
| Non-Binary | Transgender |
| Intersex | I prefer not to say |
| Other | |

Sexual Orientation

| | |
|--------------|---------------------|
| Heterosexual | Bisexual |
| Homosexual | Pansexual |
| Asexual | I prefer not to say |
| Other | |

What are your pronouns?

| | |
|-----------|---------------------|
| She/her | He/him |
| They/them | I prefer not to say |
| Other | |

Are you a Veteran?

YES
NO

Company/Organization *

Job Title *

Company Address *

Street Address

Street Address Line 2

City

State / Province

Postal / Zip Code

What is the nature of the business/organization? *

How long have you lived in the Cincinnati Region? *

Please list names of any additional organizations with whom you work or volunteer. *

Have you previously applied to or participated in a Cincinnati Chamber or other community leadership program (e.g., Leadership Cincinnati, C-Change, WE Lead, Urban Leaders Program, Leadership Northern Kentucky)? *

YES

NO

If yes, which program(s) and what year(s)? *

Are you aware of others from your organizations who are applying for the program? *

YES

NO

Why are you interested in participating in this program? What do you hope to gain from the experience? *

0/100

Why is now the right time for you to participate in this program? *

0/100

Personal Email Address

example@example.com

What are your goals for this program? *

0/100

Please share something that will help us get to know you better as an individual. This could be personal or professional, serious or fun. *

0/100

How did you hear about the Hello Cincy Executive program? *

- | | |
|--------------|---------------------|
| Email | Referral |
| Social Media | The Chamber Website |
| Digital Ad | Print Ad |
| Event | Other |

I understand the attendance requirements and have blocked my calendar now to make this a priority. *

- YES
- NO

Where did you live prior to moving to the Cincinnati region? *

I understand the purpose of Hello Cincy Executive and will devote the time and energy necessary to make it a successful experience if I am selected to be a participant. *

- YES
- NO

Is your company/organization sponsoring your tuition?

- Yes
- No
- I'm not sure

Would your company/organization be interested in hosting one of our sessions?

Yes

No

I'm not sure