

Leadership Mississippi Employer Consent Form

This document is to be completed by the employer of an individual seeking to participate in the Leadership Mississippi program.

Your employee, _____ (“Employee”) has applied to be a member of the 2016 Class of Leadership Mississippi.

Leadership Mississippi is an annual program of the Mississippi Economic Council conducted by the M.B. Swayze Foundation. Participants, selected by a committee of MEC’s Leadership Mississippi Alumni, work together in a training program that combines individual study, group sessions and project experience in using leadership skills. Leadership Mississippi is endowed through a generous contribution by the late J.C. and Annie Redd. J.C. Redd was Chairman of the Mississippi Economic Council in 1973-74 when the program began.

Leadership Mississippi is the second oldest statewide leadership program in the nation. Since its inception in 1974, Leadership Mississippi has graduated more than 1,100 alumni active in Mississippi business and politics. Mississippi’s top business executives have participated in Leadership Mississippi as a way to expand their networks. Many elected leaders, including a former governor, are graduates and recognize the value of the Leadership Mississippi experience.

As a member of the 2016 Class of Leadership Mississippi, Employee would be required to attend various Leadership Mississippi functions throughout the state as they learn more about different types of leadership. It is very important for each Leadership Mississippi Class of 2016 participant to attend the sessions throughout the year in order to receive the full benefit of the program.

Leadership Mississippi 2016 Schedule

Jackson

February 4 - 5

Brookhaven

March 24 - 25

Mississippi Gulf Coast

June 9 - 10

DeSoto County

August 25 - 26

Greenwood
November 10 - 11

Jackson
December 2 - **Graduation**

* - Attendance is mandatory for the opening session. By signing below, you are indicating that you give permission for Employee to participate in all Leadership Mississippi activities as a representative of your business or organization.

Employer Name: _____

Title: _____

Full Name of Company: _____

Email Address: _____

Date: _____

Address: _____

Telephone: _____

I approve Employee's participation in the Leadership Mississippi Class of 2015.

Signature: _____

Please fax or mail this completed document to:

Cathy Northington
248 E. Capitol St., Suite 940
Post Office Box 23276
Jackson, MS 39225-3276
Fax: (601) 353-0247

Please direct any questions you have regarding this form to:
cnorthington@msmec.com