



ALABAMA  
VETERINARY  
MEDICAL  
ASSOCIATION



POWER OF TEN  
LEADERSHIP ACADEMY

# Application Form

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Preferred Address: \_\_\_\_\_

City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_

Daytime Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

School: \_\_\_\_\_

Graduation Year: \_\_\_\_\_

Current Employment Type: \_\_\_ SA \_\_\_ LA \_\_\_ Mixed \_\_\_ Post-Grad Program  
\_\_\_ Other \_\_\_\_\_

Do you have mentors that would support your participation in POT? \_\_\_ Yes \_\_\_ No

IF yes, Name(s) of Mentor:

\_\_\_\_\_

**Following Questions** – Please address the following questions – You may attach additional papers as needed to paint a complete picture for the evaluators to consider.

**Perspective** - Express why you're interested in participating (e.g. what life experiences or unique perspectives might you bring to the group, what examples can you give from your past experiences that would bring depth and diversity to this group).

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**Goals** - What goals do you hope to achieve through participating?

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**Activities** -List organizations, clubs and/or committees in which you have actively participated or held office (including veterinary school).

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Have you previously applied for the POT program? \_\_\_ Yes \_\_\_ No

\*There will be 4-5 Power of Ten meetings throughout the year, both in-person and virtual. With your commitment, attendance is considered mandatory. The ALVMA staff and Power of Ten Program Chair would be happy to support/participate in any conversations with employers or managers to help convey the benefits of your participation in this program. We try to have meetings scheduled well in advance to help with working around work commitments. Our first in-person meeting will be on **March 30, 2025**, at the Marriott Resort Auburn-Opelika, Opelika, AL.

Please return completed application to Staci Corder by December 15.

Email: [staci@alvma.com](mailto:staci@alvma.com) Fax: 931-433-6289