|  |  |  |  |
| --- | --- | --- | --- |
| Applicant name  |  | Company name(s) | Comment below if more than one |
| Cell phone |  | City & province |  |
| Email |  | # of full time equivalents (FTE)  |  |
| Job title | Explain below if not CEO  | % ownership (explain below if <50%) |  |
| Nominated by |  | Annual revenue (of all companies) |  |
| Personal LinkedIn link |  | Company age / years as CEO |  / |
| Personal Facebook link |  |  Corporate website URL |  |
| The questions below allow the judges to determine the fit between you and ELP. Please feel free to adjust the space per answer, but **do not** exceed this **SINGLE** page or change font from 10 point. Send it to apply@wallacemccaininstitute.com by March 31st.  |
| 1. **Describe your business (activity/size/geography)**
 |
| 1. **What are your proudest business accomplishments to date?**
 |
| 1. **What is your vision for how your company will grow in the next 10 years?**
 |
| 1. **Describe your motivation to apply to become a member of ELP.**
 |
| 1. **What are the top decisions that you face during the next year?**
 |
| Provide the names, emails and phone numbers for 2 business references and an ELP alumnus you have discussed this with (if possible). By sending this application, you confirm that you have had a discussion with an alumni or WMI staff about the program cost & ongoing program. |
| 1.  |
| 2.  |
| ELP Alumnus:  |
| Underline one: (1) I can only do Th/Fri (2) slight preference for Th/Fri (3) indifferent (4) slight preference for Fri/Sat (5) I can only do Fri/Sat |