



MIDWEST ADVANCED LIONS LEADERSHIP INSTITUTE (MALLI)

Location: Northwest Missouri State University, Maryville, MO, USA

Dates: July 27 – July 30, 2023

Application Due Date: NLT 7/13/2023

Applicants: Limited to the first 25 qualified Lions

Languages Offered: English

Purpose of the Midwest Advanced Lions Leadership Institute (MALLI)

The purpose of the Midwest Advanced Lions Leadership Institute is to provide Lions leaders with an opportunity to enhance skills in preparation for leadership responsibilities at the zone, region and district levels.

Participant Qualifications

1. Applicants must be Lions that have completed a successful term as club president, but have not yet attained the position of first vice district governor. Lions members who are currently serving as club presidents will be considered on a space-available basis.
2. Applicants must be willing to commit to attending all days of the institute, including group mealtimes, and understand that personal time is extremely limited. **Attendance at all classroom sessions and scheduled meals is mandatory.**
3. Applicants must be capable of understanding and participating in the language of instruction at this institute.

Cost of the Institute

Midwest Advanced Lions Leadership Institute will provide meals and lodging according to the schedule of the institute. Registration Fee is US \$220 if received by April 30, 2023. Beginning May 1, 2023, the base fee increases to US \$240. **Make checks payable to MALLI and mail to PID Gary Fry, PO Box 606, Mitchellville, IA 50169.** Sorry, no refunds can be made for cancellations. Your registration fee includes nine meals, all Institute costs and dormitory rooms (single occupancy). Lions may request to room together. Check in at the dormitory is permitted from 3:00 P.M. to 4:00 P.M. on Thursday, July 27th and check out must be completed by Noon on Sunday, July 30th.

Application Procedure

Submit the completed application (mail or email) to Registrar/Curriculum Coordinator PCC Hans Neidhardt, 7400 NW Ayr Road, Potwin, Kansas 67123, (316) 435-2800, hnwizardofoz@gmail.com. On-line forms will also be made available.

Upon submission of the application, senders will receive a reply to serve as a receipt of the application. If no reply is received, check spam/junk folders and resubmit as needed.



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Part 1: Applicant Information

District Number: _____ Membership Number: _____

First/Given Name: _____ Last/Family Name: _____

Email* : _____ * PLEASE PRINT - Required information for all institute correspondence

State/Province: _____ Country: _____

Gender: Male Female Month and Year Joined Lions Clubs: _____

Club Number: _____ Lions Club Name: _____

Current Lions Title: _____ Highest position held in Lions Clubs: _____

Select Preferred Language(s) of Instruction: English

I confirm that I am capable of understanding and actively participating through reading, writing, and fluent speaking skills in the language(s) selected above.

Date of most recent term as Club President and Lions Club Name _____

Lions Leadership Institutes Previously Attended (Locations & Dates) _____

Part 2: Experience, Skills, and Special Requests Please type or print using additional sheets as needed.

1. Offices held within current Lions Club:
2. Committee positions held within current Lions Club:
3. Previous Lions Clubs of which you have been a member and offices held:
4. Why is this institute of interest to you?
5. Please check all of the following "Special Requests".

- _____ Double Occupancy (Name of roommate) _____
- _____ Diabetic Diet requested
- _____ Vegetarian Diet requested
- _____ Vegan Diet requested
- _____ Wheelchair Access required
- _____ Vision Impaired (List what accommodation(s) are needed)
- _____ Hearing Impaired (List what accommodation(s) are needed)
- _____ Mobility challenges (List accommodation needed)

Please list any other special requests _____



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Part 3: Acknowledgements

- I understand that Midwest Advanced Lions Leadership Institute is not responsible for personal costs, including but not limited to, those associated with the following: illness, unanticipated or other personal events, lost or stolen property of participants.
- I understand that participants are requested to carry medical insurance information in the event they require medical services.

Name of Applicant

Signature