IBA - 2025 Executive Development Program Registration Form

Name	Nickname	
Current Title		
Institution		
Address		
Telephone Number		
Email Address		
How long have you been in banking:		
Summary of banking experience:		

Description of current responsibilities:

How many employees report to you? _____

(Attach additional sheets if necessary)		
Mentor information (required):		
	Title	
Phone	Email	
Applicant's Signature	Date	
Recommending Manager's Signature		
Recommending Managers Title		
Recommending Managers Email	Phone	
Senior Management Approval		
This program is designed to be intense and collaborative spirit are a must. The program industry and the skills necessary to lead be designed for those:	demanding. A competitive attitude and a n focuses on developing a solid understanding of t nks and communities into the future. This prograr	the n is
leadership rolesHigh-potential employees poised to me	o retain for the long term and develop for significant ove into new positions eed to strengthen critical development skills	
•	Adams at ladams@idahobankers.org	
Cost IBA Members: \$4,500 per student until Dec	ember 16, \$4,800 thereafter	
Non Members: \$7,000 per student until Dec	cember 16, \$7,500 thereafter	
Payment Information		
Check is enclosedPlease invoice		
Billing Address	City/ST/Zip	
Rilling Contact	Fmail	

What are your professional goals?