



LEADERSHIP

American Legion Auxiliary • Department of Mississippi Annual Report

Due to the Department Chairman by May 1, 2011
Inez McCain, P. O. Box 415, Cleveland, MS 38732

Unit Name/Number _____

Chairman Name _____

Chairman's Address _____

1. Number of Senior members in your Unit _____; Juniors _____

2. Did you use the mini-Leadership topic from the Department newsletter? _____
If yes, how many? _____

3. Did you develop at least three Leadership Training sessions and present them to unit members at Unit meetings? _____ Topics covered: _____

(provide details on how you presented Leadership Training to your Unit.)

4. Number participating in all unit Leadership Training sessions
Session I: _____ Session II: _____ Session III: _____
(provide add'l numbers if more than three sessions were presented)

5. Number of members taking/passing the Senior Correspondence Course? _____
Junior Correspondence Course? _____ (List names on the back of this form)

6. How many mentor partnerships were created between members of your Unit? _____

Detail your success with this effort; who was paired: _____

7. How many new leadership resources were purchased and utilized this year?

List those purchased and how used _____

(If you need more space to outline/report on your program activities, please use a separate page or the back of this form.)