Leadership Guernsey

2017-18 Application

Application Deadline: July 21, 2017

Name: _____

Home Address: _____

Employer: _____ Position: _____

Business Address: _____

Business Phone: _____

Email Address: _____

Preferred Mailing Address: (circle one) Work Home

Organization/Professional Affiliations: _____

_____

_____

Why are you interested in enrolling in Leadership Guernsey? _____

_____

What do you hope to gain from this experience? _____

_____

_____

References: Please list two people who are familiar with your leadership performance and potential and from whom we could request information.

Name: _____ Phone Number: _____

Name: _____ Phone Number: _____

Nominator (If same as candidate, write SAME on NAME line)

Name: _____

Home Address: _____

Phone: _____

Comments about Candidate: _____

_____

Which of the following categories best describe your present area of leadership activity or interest?

Human Service	Government	Labor	Religion	Business and Industry
Media	Education	Medical	Law	Volunteerism
Civic Organization	Arts	Other (specify): _____		

What do you believe are the three most pressing problems facing Guernsey County?

1. _____
2. _____
3. _____

What do you believe are the three greatest opportunities in Guernsey County?

1. _____
2. _____
3. _____

The success of the Guernsey County Leadership program is dependent upon each participant's commitment to attend monthly sessions. No more than two pre-approved absences are permitted in order to complete and graduate from the program. The two day orientation is manadatory. I will be able to honor the significant time commitment. I believe that I will receive support from my employer and my family. Payment must be received in full prior to the first meeting.

_____

Signature of applicant Date

_____

Signature of party responsible for payment *(Required)* Date

Please return to: Cambridge Area Chamber of Commerce • 607 Wheeling Ave., Cambridge, OH 43725
or Fax to 439-6689 or email scan to info@cambridgeohiochamber.com