

Confidential application

2021 Shawnee Tomorrow Leadership Program

Last Name	First Nam	First Name		
Home address	City/State	Zip	Phone	
Business Name	Position Title		Years in Current Position	
Business Address	City Star	City State		
Business Phone	E-mail Ad	E-mail Address		
Briefly state the reason you wis	sh to participate in the Shawnee To	omorrow Leadersh	ip program.	
Community involvement list o	civic, religious, education, busines	ss, government, at	hletic, or any other activities.	
Education (include undergradu	ate and any post-graduate)			
Institution				
Dates attended				
Degree I				

Please list three personal, professional or community references.

Name	Organ	zation	Phone
1			
2			
3			
Name badge			
	First name	Last name	
		Company	
Employee agreement If accepted, I agree to pa	articipate in all scheduled s	essions and activities.	
Signature		Date	
Employer's agreement	if applicable		
and I represent that his/	her employer is willing to m	for the 2021 ake available the necessary time 00 investment to participate in th	Shawnee Tomorrow Leadership program for full participation in all scheduled ne program.
Signature		 Date	
Employer/Supervisor Na	ame		

Please email the completed form to Amy Niemann at aniemann@shawnee-edc.com or drop off at the Shawnee Chamber offices by November 30, 2020.

Shawnee Chamber of Commerce | 15100 W. 67th St. | Suite 202 | Shawnee, KS 66217 p 913.631.6545 | f 913.631.9628 | www.shawneekschamber.com

Shawnee Tomorrow Leadership is a program of Shawnee Chamber of Commerce Foundation 501(c)3

