



BRUNSWICK-GOLDEN ISLES CHAMBER OF COMMERCE

1505 Richmond Street, Second Floor, Brunswick, Georgia 31520

Telephone (912) 265-0620

www.brunswickgoldenisleschamber.com

2019-2020 Leadership Glynn Application

Application Deadline –Thursday, August 15, 2019. No late applications will be accepted.

I. BASIC PERSONAL:	
Full Name:	
Nickname:	
List your name the way you would like it to read for your name tag:	
Address 1:	
Address 2:	
City, State, Zip:	
Contact Phone Number:	
Contact Email Address:	
Date of Birth:	
How long have you lived in Glynn County?	
II. EMPLOYMENT:	
Employer Company Name:	
Address of Employer:	
Address 1:	
Address 2:	
City, State, Zip:	
Current Title/Position:	
Number of Years Present Position:	
Name of Supervisor:	
Title of Supervisor:	
Employer Telephone Number:	
Employer Email Address:	

If your employer IS NOT your tuition sponsor, please fill out the information below. If your employer IS your tuition sponsor, then leave blank.

Name of Sponsor:	
Sponsor Telephone Number:	
Sponsor Email Address:	

III. COMMUNITY INVOLVEMENT:

Please explain in detail three civic, business, religious, political or social activities that you have participated in within the past three years in Glynn County. Please indicate the name of the organization, your assignment or position, and describe your responsibilities.

What do you consider to have been a highlight or accomplishment associated with any of the groups/activities mentioned above?

How much time do you commit each month to community, civic, professional and/or other organizations and activities?

IV. PROGRAM PARTICIPATION:

If you are selected to participate in the 2019-2020 Leadership Glynn Class Program, what are your goals for involvement in the community?

What do you expect to gain from your participation in Leadership Glynn?

We are looking for ideas for a community project that we will complete together. What community projects are important to you? What are some ideas of projects that we could do as a group? Please be specific:

V. PROGRAM REQUIREMENTS:

The Leadership Glynn Program consists of approximately (10) informative and interactive sessions designed to educate participants on major Glynn County and regional issues.

The program is typically held one Friday each month in different locations throughout the county. In addition to monthly classes, a two-night trip to the State Capitol is also scheduled for January-February 2020. Participants **may only miss two of the scheduled sessions** to successfully complete the Leadership Glynn Program.

To kick-off the program, there are two events in September—

- The evening of September 12th there will be a welcome reception where you and your significant other are invited for a meet-and-greet of your fellow classmates. Here you will receive your name tag, class directory and other pertinent information about the year.
- This year, we have added a **MANDATORY** overnight retreat that takes place on September 19th at noon to September 20th at 5pm. There will be a bus that takes everyone to and from the location.
 - *I understand that this is a mandatory program requirement and by applying, I am agreeing that I will be available to participate in this retreat.*

Initial here: _____

- VI. FEES:** If selected, your tuition for the Leadership Glynn Program will be \$900, **payable to the Chamber in advance of the kickoff session**. All costs associated with the trip to Atlanta will also be your responsibility except transportation and event entrance fees.

VII. APPLICANT COMMITMENT AGREEMENT:

I have reviewed the Leadership Glynn Program requirements and I understand that, if selected to participate in the program, I will commit to attending all planned activities and programs. I understand that I can only miss two of the sessions to successfully complete the program and that no portion of the tuition will be refunded if I cancel or am not able to complete the program.

Date

Applicant Signature

VIII. EMPLOYER PARTICIPATION AGREEMENT:

As this applicant's employer, I have reviewed the participation requirements of the Leadership Glynn Program. I understand the time commitment required of this program, and I will support and facilitate the applicant's participation in the program, should he/she be selected to participate.

Supervisors Signature

Supervisors Title

Date

IX. APPLICATION SUBMISSION:

Please return completed application –

EMAIL:

dlewis@bgicoc.com

MAIL:

Danielle Lewis
Leadership Glynn Program
Brunswick-Golden Isles
Chamber of Commerce
1505 Richmond Street,
Second Floor
Brunswick, GA 31520

FAX:

(912) 265-0629

ATTN: Danielle Lewis

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