Application for Admission

Please complete the following and submit to the Chamber office by September 8, 2023 Date: _____ Name: Employer: _____ Title/Position:____ Work Address: Email: _____ Cell Phone #: ____ Work Email: _____ Work Phone #: _____ **Employment History (Beginning with Present)** Employer Position Location (City, State) Dates Affiliations (Please list professional, business, civic, social, and religious affiliations you hold or have held) Offices/Positions Held Organization **Dates**

127 W. Court Street, Urbana, OH 43078 | 937-653-5764 | info@champaignohio.com

xplain briefly what you hope t	o gain from your participation in Leadership Champaign Cou
What, in your opinion,	are the greatest assets Champaign County has to offer?
What, in your opinion, are	e the three most pressing issues facing Champaign County?
	a statement that you are willing to make the commitment on of Leadership Champaign County. Attendance and
ticipation will be reported to	
olicant Signature:	Date:
ployer Signature:	Date:
	Employer Phone #:
turn Completed Application to:	
	127 W. Court St. Urbana, OH 43078
	info@champaignohio.com

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