

## APPLICATION FORWARD WISE COUNTY 2024

A LEADERSHIP DEVELOMENT PROGRAM SPONSORED BY THE WISE COUNTY/CITY OF NORTON CHAMBER OF COMMERCE

Name			
First	Last	Middle	
Age	MaleFemale	Years lived in Wise County/City of Norton	
Mailing address			
Phone	E-mail address		
Spouse's name	Age(s) of child (ren)		
Employer			
Address	Phone		
Position	Years with employer		
High School Attended	Date of Graduation		
College/University Attended	Date of	Graduation	
		ies, civic, professional, business, religious, social, athletic and/or other t important) Please list any other offices held.	
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What do you consider your most important career or civic achievement or responsibility?

What do you hope to learn from Forward Wise County?

What do you consider the three most important issues/challenges facing Wise County/City of Norton at present?

1	 	
2.		
3.		

What areas of community service interest you? Check all that apply

Running for public office	Serving on appointed boards/commissions
Volunteer work (food bank, church, etc.)	Civic organizations (Lions clubs, Kiwanis club, etc.)
Other	

Participants are required to attend all sessions and field trips. Absences will be excused only in cases of serious illness or business emergency. The retreat at the beginning of the program is mandatory. A Certificate of Completion will not be awarded to those who have more than one un-excused absence.

I support this requirement and if selected to participate in Forward Wise County 2019, I agree to fully participate and to attend

all sessions.

Signature\_\_\_\_\_ Date\_\_\_\_\_

Please return application no later than January 31, 2024 to the Wise County/City of Norton Chamber of Commerce, 765 Park

Avenue, Norton, VA 24273. Phone 276-679-0691-E-mail - info.wisecountychamber@gmail.com