



**Class of 2018
Application for Participation**

First Name: _____ **Last Name:** _____ **select:** M F

Address: _____

City: _____ **Zip:** _____ **select:** James City Williamsburg York

Phone: _____ **Email:** _____

Please provide the following information. For more space, you may attach a separate sheet.

1. Do you have an interest in serving as a volunteer in a particular area?

2. Describe some of the ways you have been involved in your community.

3. Please tell us what you believe the CLS program is about, what you hope to gain from your participation in the CLS program, and anything else you would like us to know about you.

Will you be available for all sessions of the CLS Class, held all day, every Tuesday beginning

4. January 23 through April 3?

select: Yes No

5. What questions do you have for us?

6. How did you find us? If a referral, to whom may we direct our thanks?

*CLS represents a significant time and financial commitment. You should plan to attend all scheduled events to gain the full benefit of the program and to receive a certificate of completion. **The \$500 tuition covers all program costs.***

Applicant Signature

Date

This application may be submitted by email to clsprogram@cox.net, or by mail/hand-delivery to Community Leadership Service, c/o The Greater Williamsburg Area Chamber & Tourism Alliance, 421 North Boundary Street in Williamsburg. The deadline for applications is November 30 of the preceding year of the Class.

