

## APPLICATION FORWARD WISE COUNTY 2025

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 o	of Graduation
College/University Attended	Date o	of Graduation
List, in order of importance to y	you, up to five commur	nities, civic, professional, business, religious, social, athletic and/or othe
organizations which you are an	active member. (1 = mo	ost important) Please list any other offices held.
1		
2		
3		
4		
5		



What do you consider your most important caree	er or civic achievement or responsibility?
What do you hope to learn from Forward Wise C	ounty?
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? CRunning for public office	Check all that applyServing on appointed boards/commissions
Volunteer work (food bank, church, etc.)	Civic organizations (Lions clubs, Kiwanis club, etc.)
Other	
Participants are required to attend all session	ns and field trips. Absences will be excused only in cases of serious illness or
business emergency. The retreat at the begin	nning of the program is mandatory. A Certificate of Completion will not be
awarded to those	e who have more than one un-excused absence.
	cicipate in Forward Wise County 2025, I agree to fully participate and to attend
all sessions.	
Signature	Date

Please return application no later than January 31, 2025 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