



# LAMOILLE REGION CHAMBER OF COMMERCE



92 Lower Main Street, P.O. Box 1459, Morrisville, VT 05661 P: (802) 888-7607 F: (802) 888-5006 www.lamoillechamber.com

## **Board of Directors**

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Myers Containers

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Town & Country Resort

**Chamber Staff**

*Executive Director*

**Melissa Sheffer**

*Administrative Assistant*

**Jen Kittell**

## MEMORANDUM

April 29, 2016

**To:** Chamber Membership  
**From:** Melissa Sheffer, Executive Director

### **Subject: Seeking Applications For Leadership Lamoille Class of 2016-2017**

Now in its 5th year, Leadership Lamoille, a program sponsored by the Lamoille Region Chamber of Commerce, has provided the tools for today's employees to become tomorrow's leaders. The program has helped to prepare more than 50 participants for leadership roles. The purpose of the program is to teach highly valuable leadership skills to current and future leaders working in the Lamoille Region. Its program content helps county residents/employees of local businesses strengthen their knowledge of community issues, facilitates positive problem solving techniques, and encourages them to take active leadership roles.

In response to surveys completed by former graduates and our changing demographics, the Leadership Lamoille Steering Committee has worked diligently for the past nine months to create an interesting and diverse program for Leadership Lamoille participants. The basic premise of the program has not changed; program timing, structure, and program topics have been enhanced, making the program more appealing and beneficial to employers as well as participants.

Leadership Lamoille classes are made up of business professionals that are emerging leaders within their organizations. Through this program, individuals have a unique opportunity to gain first-hand knowledge from guest speakers who, themselves, have become respected leaders within the community.

Leadership sessions will be held at Chamber member locations throughout Lamoille County, with one day being spent under the Golden Dome in Montpelier. Ten classes run from 8:00 a.m. to 4:00 p.m., beginning with orientation in September and graduation in June 2017. The cost per participant is \$600 for Chamber member businesses or \$800 for non-member businesses. Maximum of 16 individuals will be selected for the program. An application, together with a program brochure, is enclosed with this memorandum. Applications are due August 1, 2016.

Applications can be obtained by contacting the Chamber at 802-888-7607 or by emailing [jen@lamoillechamber.com](mailto:jen@lamoillechamber.com) or [melissa@lamoillechamber.com](mailto:melissa@lamoillechamber.com). You can also find information and applications on the Chamber's website.

We look forward to your participation in this dynamic program!



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## 2016 -2017 Leadership Lamoille Student Application

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

**Employment Information:** Please tell us about your current employer and job.

Business/Organization Name: \_\_\_\_\_

Job Title: \_\_\_\_\_ Date of Employment: \_\_\_\_\_

Present Responsibilities:  
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\_\_\_\_\_  
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**Education:** Please tell us about your post high school education, if any. Be sure to include any professional development programs you participated in. Please list the dates attended, name of school, program of study/degree, and what degree/certificate was conferred, if any.

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**Community Involvement:** Please list your community, civic, professional, business, religious, social, athletic and other organization with which you have been involved in the past five years. Please list the organization, the position/office you held, and approximate dates of your involvement with the organization.

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## 2016 -2017 Leadership Lamoille Student Application

**References:** Please included letter of reference from your employer to support your application and list two additional references and their contact information below.

Name: \_\_\_\_\_

Business: \_\_\_\_\_ Job Title: \_\_\_\_\_

Business Address: \_\_\_\_\_

Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Name: \_\_\_\_\_

Business: \_\_\_\_\_ Job Title: \_\_\_\_\_

Business Address: \_\_\_\_\_

Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**Questionnaire:** Please answer the following questions as thoroughly and thoughtfully as you can.

1) What impact have you made on organizations for which you have been involved?

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2) What impact has this involvement had on you?

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3) Have you been as active in the community, civic, professional and other activities as your would like to be? If not, what have been the major barriers to your involvement?

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## 2016 -2017 Leadership Lamoille Student Application

**Questionnaire Continued:** Please answer the following questions as thoroughly and thoughtfully as you can.

4) In your judgement, what is one of the most pressing issues facing our community today? Why? What suggestions or thoughts do you have to help resolve this issue?

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5) What motivated you to apply to Leadership Lamoille? If accepted, what do you plan to do with the experience and knowledge you gain?

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**Tuition:** Tuition is due in full by September 1, 2016. Of the total fee, 10% must be paid by you, the applicant, out of your own personal funds. If your employer is a Chamber member, that fee is \$60. For non-LRCC members, that fee is \$80.

Refunds will only be issued if applied for and approved by the Leadership Lamoille Steering Committee.

The fee structure is as follows:

Chamber Members: \$600

*A Chamber member means that your company/organization is a Chamber member, not you as an individual.*

Non-LRCC Members: \$800

### Payment Options:

Charge Credit Card: Yes / No (Circle One)

Name on Card: \_\_\_\_\_

Credit Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Zip Code on Card: \_\_\_\_\_ 3 Digit Code: \_\_\_\_\_ Charge Amount: \_\_\_\_\_

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

Check Enclosed: Yes / No (Circle One)

Please make check payable to Lamoille Region Chamber of Commerce, P.O. Box 1459, Morrisville, VT 05661

Check Number: \_\_\_\_\_ Amount: \_\_\_\_\_ Date: \_\_\_\_\_



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## *Employer Section: 2016 -2017 Leadership Lamoille Student Application*

**Employer Section:** Please complete the following questionnaire:

1) Describe your applicant's management skills:

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2) Describe your applicant's communication skills:

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3) Why do you recommend this applicant for the Leadership Lamoille Program?

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Employer Business: \_\_\_\_\_

Employer Authorized Signature: \_\_\_\_\_

Print Your Name: \_\_\_\_\_ Date: \_\_\_\_\_

**Please send completed applications with payment to:**  
Lamoille Region Chamber of Commerce  
c/o Leadership Lamoille Steering Committee  
P.O. Box 1459  
Morrisville, VT 05661