



APPLICATION FOR NON-RETURNING APPLICANTS

Mission Statement:

We represent Chamber members to encourage and support the growth of McLean County business.

General Information:

NAME _____

COMPANY NAME _____

JOB TITLE _____

WORK/ CELL PHONE NUMBER _____

EMAIL ADDRESS _____

Please answer the following questions with as much detail as you see fit. Please type your answers and attach them to this form.

1. From the list of qualifications on the Position Description, which qualification do you feel is most important when representing the Chamber and why?
2. What is your strongest personality trait?
3. Describe how you work as a team player in your current position.
4. What personal Chamber experience(s) can you share with members to help them understand the benefits of membership?
5. Please list two professional goals you have for the next year and how serving as an Ambassador will help you achieve those goals.

A personal interview could be required in addition to the completed above answers. Application must be returned to the McLean County Chamber of Commerce prior to 12:00PM on November 2, 2009. For additional questions or inquiries, please contact Membership Director, Dawn Smiley at 309-829-6344 or dawn@mcleancochamber.org.