

2011 EDUCATOR IN THE WORKPLACE

Coordinated by The Foundation of the Columbia Montour Chamber of Commerce

EDUCATOR APPLICATION

Please complete the following application and forward it to the Foundation office, either by mail, fax, or e-mail. All information will remain confidential.

The Foundation of the Columbia Montour Chamber of Commerce

238 Market Street
Bloomsburg, PA 17815
Phone: (570) 784-2522
Fax: (570) 784-2661

foundation@columbiamontourchamber.com
www.emccfoundation.com

Applications must be received by Friday, May 20, 2011.

Please type or print clearly.

Educator’s Full Name: _____

Home Address: _____

City/State/Zip: _____

Email Address: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____

Name of School District: _____

Name of Building: _____

Grade Level(s) you teach: _____

Subject(s): _____

Years as an educator: _____

Degree(s) Held (bachelors, masters, doctorate): _____

Type of Business In Which You Are Interested:

Any Specific Business You Would Like To Target?

Please tell us the reason for your choice and what you hope to learn from your experience that will benefit your students.
