



FARRAGUT
WEST KNOX
CHAMBER *of*
COMMERCE

2010 APPLICATION
BOARD OF DIRECTORS

Please type or print in black ink.

Name _____ Phone _____ (home)

Home Address _____

Business _____ Phone _____ (work)

Business Address _____

Business/Applicant is member of FWKCC Yes _____ No _____

(Attach additional paper if needed and resume)

APPLICANT'S ROLE / TITLE w/ MEMBER BUSINESS

PROFESSIONAL EXPERIENCE (employer, title, duties, other significant information)

BOARDS AND COMMUNITY SERVICE (past and present activities)

AWARDS AND ACHIEVEMENTS

**WHY DO YOU WANT TO SERVE ON THE FWKCC
BOARD OF DIRECTORS?**

STATEMENT OF APPLICANT

I wish to be considered as one of the nominees for the Board of Directors of the Farragut West Knox Chamber of Commerce. The appointment will be for a 1-3 year term as a FWKCC Director with said term beginning July 1, 2010. I understand the appointment as a Director is voluntary, serves in a formal and helping capacity, requires a dedication to the organization, and a commitment of time. I acknowledge by my signature below that the information provided and listed above is correct. Furthermore, I understand and agree that membership with the FWKCC is a requirement and that I or the member business in which I represent will maintain status as an active member in good standing throughout my term of appointment. Additionally, I acknowledge that if I am selected for this position that I will fully accept this appointment and the associated responsibilities as a FWKCC Director.

Signed this ____ day of _____. 2010.

Signature of Applicant

IMPORTANT: Application must be submitted no later than **4:00 p.m., Friday, June 11, 2010** to :

Nominating Committee
Farragut West Knox Chamber of Commerce
P.O. Box 22461
Farragut, Tennessee 37933-0461
or
11826 Kingston Pike
Farragut, Tennessee 37922
Questions: 675-7057