

Thank you for completing this reference for a Leadership Augusta Class of 2025 applicant. Please limit your recommendation to the space provided on this form. Personal letters of recommendation will not be considered. Please type or PRINT all information.

I am providing a reference for:	, who I recommend for participation in Le	eadership Augusta.
Your Name:	Title:	
Company:		
Office Address:		
City, State, Zip:		
Phone: E-Mail A	Address:	
A. How long and in what capacity have you know	vn the applicant?	
B. With what frequency and in what kinds of situa	ations do you come into contact with the applicant?	
C. Are you a Leadership Augusta graduate?		
D. How will the applicant enhance Leadership Au	ugusta?	
E. What are the first three (3) words that come to	o mind that describe the applicant (Limit 3 words)	
		

Please return the completed form to the applicant.

You may place your recommendation and copies in an envelope if you would prefer.

Application deadline is Friday, April 19, 2024 5:00 PM

Please direct your questions to Leadership Augusta 706-821-1308 or Emilee.Heise@AugustaMetroChamber.com.