

**IMPORTANT:** To serve on the Metro EDGE Leadership Council, you must attend the retreat Friday, December 4 and Saturday December 5, 2015 in Napa, California.

Please carefully read the Metro EDGE Organizational Plan and Structure [\[INSERT LINK\]](#) for complete information about the program and the Program Chair Involvement Guidelines [\[INSERT LINK\]](#) before completing this application. You must provide responses to the following questions for your application to be considered complete.

Once you hit the "Done" button at the end of the page you will not be able to come back to this page to change your answers. It may be helpful to draft your answers to the application questions in a different format (like MS Word), then paste your final answers here in this survey format for submission.

All applicants are invited to attend a Metro EDGE Leadership Council meeting on Wednesday, August 5, 6:00 p.m.-7:00 p.m. in downtown Sacramento. Please email [Shante.Matteis@hp.com](mailto:Shante.Matteis@hp.com) to RSVP.

Applications will close at 5 p.m. on Friday, August 14, 2015 and notifications made on or before September 18, 2015.

**\* 1. Contact Information**

Name

Employer

Title

Email Address

Cell Phone

**\* 2. Are you a current member of Metro EDGE? (Note, you must be a current member to be considered)**

☐ YES

☐ NO

If yes, how long?

**\* 3. References - List the name and contact information of references who can be contacted by the selection committee (please include name, affiliation, phone number, and e-mail address).**

Reference 1

Reference 2

Reference 3

\* 4. Do you currently serve on a Metro EDGE Committee?

☐ YES

☐ NO

If yes, specify which committee and describe your role

\* 5. What time commitment per month will you be able to contribute if elected? What specific limitations should we know about?

\* 6. Do you volunteer with any other organizations?

☐ YES

☐ NO

If yes, list and describe responsibilities

\* 7. Why are you a member of Metro EDGE?

\* 8. The program chair serves a three year term. Can you serve three years? (See Involvement Guidelines for more information)

☐ YES

☐ NO

\* 9. Why do you want to be chair of Metro EDGE?

\* 10. What do you think is the Sacramento region's biggest strength? It's biggest opportunity? Please explain why.

\* 11. What is your vision for the future of the Sacramento region?

\* 12. What role does Metro EDGE play in achieving your vision for the region?

\* 13. If selected, can you attend the mandatory retreat Friday, December 4 and Saturday, December 5, 2015?

☐ YES

☐ NO

\* 14. Do you understand the commitments of joining the Metro EDGE Leadership Council as described in the Organizational Plan and Structure and the Program Chair Involvement Guidelines and agree to adhere to them to the best of your ability?

☐ YES

☐ NO

By submitting this application, I agree to the collection, use and processing of the personal information I provide to Metro EDGE in this application for the purposes of organization administration, payment of my dues, and inclusion of my contact information in a members' directory that will be available to Metro EDGE members and the Sacramento Metro Chamber.