



F L O R I D A ' S  
**Putnam County**  
CHAMBER OF COMMERCE

**2026 LEADERSHIP PUTNAM APPLICATION**

**Application Due Date:** *April 30, 2026*

**Applications may be emailed to [ShawnDaleGoddard@ChamberPC.com](mailto:ShawnDaleGoddard@ChamberPC.com) with the subject line "2026 Leadership Putnam Application" or dropped off at the Putnam County Chamber of Commerce, 1100 Reid Street, Palatka**

Sponsored By:



**Georgia-Pacific**

Leadership Putnam's mission is to cultivate an informed and diverse network of community leaders dedicated to bringing our communities together. We aim to provide consistent leadership that enhances the quality of life and work in Putnam County.

Name
_____
Email
_____
Home Address
_____
City _____ State _____ Zip _____
Cell Phone _____
Birthday (month/day/year(opt.)) ____/____/____ Favorite Color _____

Employer Name \_\_\_\_\_

Job Title \_\_\_\_\_ Years in Role \_\_\_\_\_

Employer Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Business Phone \_\_\_\_\_

Immediate Supervisor Name \_\_\_\_\_

Immediate Supervisor Email \_\_\_\_\_

**EMERGENCY CONTACT INFORMATION**

Emergency Contact Name \_\_\_\_\_

Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Medical Conditions/Allergies Needing Accommodation: \_\_\_\_\_

**EMPLOYMENT HISTORY:** Please account for the last five+ years of employment:

Employer	Position	Dates	Reason for Leaving

**COMMUNITY INVOLVEMENT:** How do you intend to stay involved in community activities?  
(Examples: Chamber of Commerce, Elected Public Official, Volunteerism, Boards You Serve On, Service Clubs, etc.):

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List any extracurricular activities and special honors received:

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**REFERENCES:** Please list two individuals who are knowledgeable about your leadership performance and potential. Please submit one letter of recommendation.

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**ATTENDANCE:** As a professional, Leadership Putnam participants are expected to attend as many leadership sessions as possible. The first session, Simulated Society (SIMSOC), is mandatory attendance and the course will be a full day. I understand the goals and commitments of the Leadership Putnam program. If selected, I will pay my tuition in full by May 21, 2026, and devote the required amount of time to the professional development program.

**EMPLOYER ACKNOWLEDGMENT:** This candidate has my full support to participate in Leadership Putnam. I am aware of the time commitment involved in his/her effective participation:

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Signature of Employer

Company/Organization

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Signature of Applicant

Date



**Please answer the following questions for your introduction:**

My most unique talent is: \_\_\_\_\_

On my days off, you will most likely find me: \_\_\_\_\_

The person who inspires me the most is: \_\_\_\_\_

..... because \_\_\_\_\_

If I were an animal, I would be a \_\_\_\_\_ because \_\_\_\_\_

**TUITION:**

The Chamber member cost is \$1,500.

The non-member cost is \$2,000 (includes 1-year of Chamber membership)

**PAYMENT DUE AFTER SELECTION NOTIFICATION**

*Make check payable to: Putnam County Chamber of Commerce*

***I understand that Leadership Putnam is a seven-month commitment.*** \_\_\_\_\_ (Initial Here)

Shirt Size \_\_\_\_\_ Men's or Women's \_\_\_\_\_

If selected, you will be notified after April 30, 2026, with further information and instructions.

**Food Allergies:**

**Special Considerations/Needs:**

There will be a lot of walking, possibly standing for extended periods of time, as well as climbing stairways.

**Please return payment no later than May 21, 2026, to:**

Putnam County Chamber of Commerce

Attn: Leadership Putnam

1100 Reid Street, Palatka, FL 32177

**Office Use:**    \_\_\_ Approved \_\_\_    Notified \_\_\_    Payment In-Full

Payment Date \_\_\_\_\_    Amount \_\_\_\_\_    Check # \_\_\_\_\_