

Return to Applicant no later than: JUNE 15

LEADERSHIP PLANO
A Program of the Plano Chamber of Commerce
Recommendation Form

To be completed by Sponsor/Endorser. Seal in an envelope and return to the applicant.

Instructions:

Please use this form or use the information on this form as a guideline for a separate letter of recommendation. The applicant must submit this recommendation form/letter with the completed application **no later than June 15**. You may use additional paper if needed; however, please be as concise as possible. Please type or print legibly in black ink.

Name of Applicant _____ **Length of Acquaintance** _____

Type of Relationship [check appropriate response(s)]

Close Personal Relationship Numerous Business Contacts Numerous Social Contacts
 Principally by Reputation Occasional Business Contacts Occasional Social Contacts

Give details of your knowledge of applicant's participation in civic, community and faith-based activities:

Other pertinent information:

Reason applicant will make an outstanding LEADERSHIP PLANO participant:

Name of person making recommendation (please type or print)

Date

Signature