Chamber Leadership Academy
Course Request for Proposal

Please submit to lindsay@westmlorelandchamber.com

Course/Session Name: _____

Teacher/Speaker: _____

COUSE & SPEAKER INFORMATION

This course would be best for: (*check all that apply)*

☐ Leadership Westmoreland (9 month adult cohort program, September -May)

☐ Youth Leadership Westmoreland (1 week high school session in June)

☐ FUEL Young Professionals Group

☐ Professional Pathways (Leadership and Workforce Development Sessions)

Time Needed: ☐ 60 min. ☐ 90 min. ☐ 120 min. ☐ Half day ☐ Full day ☐ Other

Course Description:

_____

_____

_____

_____

Objectives to be Met: (list up to 5 objectives)

1.
2.
3.
4.
5.

Speaker bio:

_____

_____

_____

_____

PARTICIPANT INFORMATION:

Session best for: *(Briefly describe a general target audience. i.e. Entry level employees, HR professionals, industry specific audience, etc.)*

_____

_____

Min number of participants: _____

Max number of participants: _____

Ideal number of participants: _____

LOGISTICS:

Delivery Method: ☐ In-Person ☐ Virtual ☐ Hybrid ☐ Other

Classroom style preferred (if in person): ☐ Boardroom ☐ Classroom ☐ Other

Preferred Month of Session: (Dropdown) December

Preferred Time: ☐ Morning ☐ Mid Day ☐ Afternoon ☐ Evening

Technology Needs: _____

Other Needs: _____

COSTS:

Monetary Value of Session: $_____

Actual Cost to Chamber Education Foundation: $_____

Other costs: $_____

ADDITIONAL COMMENTS/NOTES TO CONSIDER:

_____

_____

_____

CONTACT INFO:

Email: _____

Phone: _____

Preferred Contact Method: ☐ Email ☐ Phone Call ☐ Phone-Text