

The Contribution *Effect*[™] for Chairs

Jumpstart Program Application

APPLICATION

Name:	
Address:	
Company: (If you participate in other business activities outside of being a Chair, i.e., consulting, teaching, etc.)	
Contact Phone Number(s):	
Email:	
Why are you a Chair?	
What would be the best result, outcome, or legacy that would be important for you to create through your work?	
What three things may make it harder (or may cause it to take longer) than you'd like to achieve that result, outcome or legacy?	

How long have you been a Chair?	
What do you like about it?	
What do you dislike about it?	
Please list five blocks, fears, automatic behaviors, or limiting beliefs that slow you down, make things harder, affect how long things take you, or keep you from doing what you really want to do?	
If you were accepted into the program what would you expect to gain?	
If accepted into the program, what would be your biggest challenge when it comes to being able to fully participate?	

<p>Why is it important for you to be considered for this program?</p>	
<p>What does Contribution mean to you?</p>	
<p>Why is now the right time for you to be considered for this program?</p>	
<p>What do you think is important for us to know about you as we consider your application?</p>	
<p>If you were reviewing your own application for consideration, what would you notice was missing that would be important for us to know?</p>	

We look forward to receiving your application.
Please scan and email your application to connect@suzannelivingston.com