

THE STATE CHAMBER'S   
LEADERSHIP NEBRASKA  
*A Program of the Nebraska Chamber of Commerce & Industry*

**Recommendation Form**

To be completed by Sponsor and included with candidate application or  
mailed to:

Leadership Nebraska Selection Committee  
P.O. Box 95128  
Lincoln, NE 68509

**Instructions:**

Please use this form OR use the information on this form as a guideline for a separate letter of recommendation. The recommendation form/letter must be received no later than April 12, 2019. As you answer the questions below, use additional paper if needed, but 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

**Provide comments regarding applicant's participation in civic, community and/or church activities:**

**Does applicant have potential for future leadership positions either within his/her business, community or statewide?**

**Reason applicant will make an outstanding LEADERSHIP NEBRASKA participant:**

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Name of person making recommendation (please type or print)      Date