



Partner in Education

Partnership of the Year Award Application

Business Partner Information

Business Name _____

Address _____

Phone _____ Fax _____

Contact Name/Title _____

Is Business Partner a current GNFC member? Yes _____ No _____

Number of Employees _____

Partner School Information

Partner School Name _____

Address _____

Phone _____ Fax _____

Contact Name/Title _____

Application submitted by:

Name _____

Phone _____ Email _____

Partnership Information

How long has the partnership been in place? _____

Please provide details of partnership agreement, including benefits to both the business partner and the school partner (two paragraphs or less). Please provide appropriate documentation.

Nominees are evaluated based on four criteria: community development, human capital development, student achievement, and financial impact. **Submit application by March 5, 2012 to:**

**Debbie Ryals
Greater North Fulton Chamber of Commerce
11605 Haynes Bridge Road, Suite 100
Alpharetta, Georgia 30009
Fax # 770-594-1059**

Questions? Contact Debbie Ryals, 678-397-0556, dryals@gnfcc.com