

A new Jewish community Leadership Program

PARTICIPANT PROFILE

NAME _____

HOME PHONE _____

MOBILE PHONE _____

ADDRESS _____

EMAIL _____

Please take a few minutes to answer the following questions:

1| What are you hoping to gain from your experience in YESOD?

2| What do you see as a challenge our community currently faces that you would like to work towards changing?

3| What are your primary leadership involvements in the community?

4| What has been the most impactful Jewish experience that has led you to want to take on a leadership role in the Hamilton Jewish community?

5| Can you commit to our evening sessions from 6-9pm on **November 13 and 27; December 11; January 15 and 29; February 26, and March 12?**

PLEASE RETURN TO grymberg@jewishhamilton.org