



Organization: _____

Org Mailing Address: _____

Org Phone: _____

Representative: _____

Representative Email: _____

Representative Phone: _____

Briefly describe your organization's mission: _____

In one sentence, please summarize your proposed project: _____

What is driving your need to achieve this project? _____

What difficulties do you expect the students will encounter? _____

How will this project better a situation? _____

What do you want the final project to be? _____

I agree to have a person from my organization serve as a project mentor. This person will make themselves available for meetings as necessary to the group and join us for project presentations at graduation on May 14th, 2026.

Signature: _____

Title: _____

Date: _____

**Return to the Rhineland Area Chamber of Commerce or Lauren@RhinelandChamber.com*