

## Personnel Form

(Copy this page and complete for each of the major participants in your project)

Name \_\_\_\_\_

Mailing Address: \_\_\_\_\_

*(Street)*

*(City)*

*(ZIP)*

Job Title and Organization: \_\_\_\_\_

*(Job Title)*

*(Organization)*

**Education** - *(Describe field of study and institution, including degrees, if any):*

**Qualifying background:** *(In the space provided, please provide a concise summary of the publications, lectures, productions, volunteer service, employment, and/or any other relevant experience which qualify this individual to serve as a resource for the proposed project.)*

**Specific Function:** *(In the space provided, please provide a summary of the function this individual will play in the proposed project.)*

**Day time Telephone:** \_\_\_\_\_

I have agreed to participate in this project contingent on its funding by the Sauk County Economic Development, Arts and Culture Committee.

Signature \_\_\_\_\_ Date \_\_\_\_\_