

Application to Become a FLEX Community

Thank you for your interest in becoming a FLEX Community! To help us understand your community's potential and goals, please complete the application below.

Section 1: Primary Point of Contact

- **Full Name:**
 - **Position:**
 - **Email Address:**
 - **Phone Number:**
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Section 2: Participating Schools

Please list the schools in your community that will be participating in the FLEX program. Include the designated point of contact for each institution.

School 1:

- **School Name:**
- **Point of Contact (Full Name):**
- **Position:**
- **Email Address:**
- **Phone Number:**

School 2:

- *(Repeat for each participating school)*
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Section 3: Community Partners

Please provide information on any community partners that have been secured to support the FLEX program. These may include local businesses, nonprofits, or government agencies committed to fostering entrepreneurship and educational support in your community.

Partner 1:

- **Partner Organization Name:**
- **Contact Person:**
- **Position:**
- **Email Address:**
- **Phone Number:**

Partner 2:

- *(Repeat for each participating partner)*
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Section 4: Community Goals and Commitment to FLEX

Please submit a brief essay (250 words) addressing the following:

- Describe your community's primary goals for implementing the FLEX program and how you envision it supporting local students, educators, and entrepreneurs.
 - Explain how becoming a FLEX Community aligns with and supports your commitment to building an entrepreneurial ecosystem.
 - Share any specific outcomes or impacts you hope to achieve through this partnership.
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Submission Instructions:

Please email this completed application to Tara Smith at tara@georgiaflex.org. Applications will be reviewed and a meeting will be scheduled to discuss next steps.

Questions?

Contact us at 229-423-9357 if you have any questions about the application process.

Thank you for your interest and dedication to fostering entrepreneurial growth!