



Great Staff Retreat Application

May 4-6, 2016

Contact Information:

Name	
E-mail	
Phone Number	
Job Title	
Department	
# of Years at Mt. SAC	

Briefly explain why you are interested in participating in the 2016 Great Staff Retreat.

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Supervisor/Manager Approval

Manager Approval	YES	NO
Manager Name (Print)		
Manager Signature		
Date		

If you have any questions, please contact a member of the Great Staff Task Force.

Please return your completed form to Carol Nelson, President's Office, by February 11, 2016