CONFERENCE:		
1A _____	2A _____	3A _____
4A _____	5A _____	6A _____

COMMITTEE NOMINATION APPLICATION FORM

(Submit electronically to tcoady@aiaonline.org)

COMMITTEE: _____ DATE: _____

NAME:_____

SCHOOL / DISTRICT: _____

POSITION:_____

ADDRESS:_____

CITY:_____ STATE:_____ ZIP:_____

EMAIL:_____

PHONE:_____

I have contacted the above individual and he/she was advised he/she had been nominated for the above AIA committee and, if selected from all the nominees, he/she would be available to attend and serve as a working member.

_____ _____

SIGNATURE OF NOMINATOR TITLE / SCHOOL

QUALIFICATIONS OF INDIVIDUAL NOMINEE: (use reverse side or attach additional information if necessary)

1. Experience in field of nomination:

2. Nominee's interest, contribution or affiliation with your school and/or state association. (Explain)