

WORKFORCE SNOHOMISH BOARD MEMBER APPLICATION



Date:

Name:

Company:

Position:

Company

Address:

Email Address:

Phone Number:

****Please attach a current resume or bio**

I declare that I meet the following qualifications: *(initial each category)*

In my position I do have optimum policy-making authority.

I do have the demonstrated experience and expertise for my position.

My Company does provide employment opportunities that, at a minimum, include high-quality, work relevant training in local in-demand sectors or occupations.

Category: *(check one category)*

Business

Workforce Readiness

Labor organization

*Joint labor management or union affiliated apprenticeship program

*CBO with demonstrated experience in employment and training of individuals with barriers to employment

*Organization with expertise in employment training needs of eligible youth.

Provider that administers adult education and literacy activities under WIOA

Title II

Institution of Higher Ed that provides workforce investment activities

Economic and community development entity

State employment service office under Wagner Peyser Act

Program carried out under Title 1 of the Rehabilitation Act of 1973

Other

Nominated by:

return completed forms to debbie.little@workforcesnohomish.org