# ITEA Board of Examiners Nomination Form

**Candidate Information** *(Must be a current member of ITEA in good standing)*

Name:

Date Joined ITEA: E-Mail:

Title:

Organization:

Address:

City: State: Zip Code:

Telephone: Fax:

**Candidate’s Biography** (Not to exceed 300 words)

*Attach a current resume or detail below the candidate’s experience, education, employment history, and other relevant background information.*

**Candidate’s Demographic Information**

ITEA Chapter: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employment Type (Select only one):

 \_\_\_\_ Academic (Full Time Student) \_\_\_\_ Government Employee

 \_\_\_\_ Academic (Teacher/Professor/Administrator) \_\_\_\_ Military (Active Duty)

 \_\_\_\_ Consultant \_\_\_\_ Not-For-Profit Organization Staff

 \_\_\_\_ Contractor (Primarily Commercial) \_\_\_\_ Retired (Private Sector)

 \_\_\_\_ Contractor (Primarily DoD) \_\_\_\_ Retired Government (Non-Military)

 \_\_\_\_ Contractor (Primarily Non-Dod Gov’t) \_\_\_\_ Retired Military

 \_\_\_\_ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employment Level (Select only one):

 \_\_\_\_ Individual Contributor \_\_\_\_ First Level Supervisor \_\_\_\_ Middle Management

 \_\_\_\_ Director/Vice President \_\_\_\_ President/CEO \_\_\_\_ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Area(s) of Responsibility (Select all that apply):

 \_\_\_\_ Acquisition/Purchasing \_\_\_\_ Engineering \_\_\_\_ Project/Program Management

 \_\_\_\_ Administration \_\_\_\_ HR/Personnel \_\_\_\_ Sales and Marketing

 \_\_\_\_ Finance/Accounting \_\_\_\_ Production/Man’f \_\_\_\_ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_

Primary Industry Segment (Select only one):

 \_\_\_\_ Consumer Products \_\_\_\_ Military Weapon Systems

 \_\_\_\_ Commercial (Non-Military) Products \_\_\_\_ Professional Services/Consulting

 \_\_\_\_ Military IT Systems \_\_\_\_ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Prior Military Service: \_\_\_\_ Yes \_\_\_\_ No

**Candidate’s Expertise** (Not to exceed 300 words)

*Please describe candidate’s expertise in any specific area(s).*

Please send completed nomination forms to James Gaidry, ITEA Executive Director,

via e-mail at jgaidry@itea.org, or by fax to 703-631-6221.