

SEMPA Committee Member Application Form

Name _____ Member Number _____
(if known)

Year Joined SEMPA _____ Current Member ___Yes ___No ___Unsure

E-mail Address _____

Please provide both home and business address, but check the address and telephone number you prefer to be contacted at.

() Home Address _____

() Business Address _____

Telephone: () Home (_____) _____
() Cell (_____) _____
() Business (_____) _____ **Ext.** _____

1. SEMPA has three (3) committees (listed below) for which the Board of Directors is accepting applications. Please indicate below which committee you are interested in serving on. If you are interested in more than one committee, please list the committees in order of preference.

Education Committee

External Relations

Technology Committee

First choice _____

Second choice _____

Third choice _____

2. For each committee you have listed above, indicate the qualities or experience that you would bring to this committee that would cause you to be selected. Please use a separate piece of paper if necessary.

a) _____

b) _____

c) _____

d) _____

3. List any committees you have previously or are currently serving on at a local, regional, state or national level. They can include committees or work groups at school, work, civic, medical societies, etc.

_____	Year _____
_____	Year _____
_____	Year _____
_____	Year _____

Signature _____ Date _____

Please include a copy of your current CV with this completed application form.

- Submit all materials to the ATTN: SEMPA Committees at SEMPA Headquarters, 1125 Executive Circle, Irving, Texas 75038 **postmarked by December 31, 2010.**
- Submit all materials electronically to committees@sempa.org by **no later than midnight (Central) December 31, 2010.**

Your completed application, current CV and any letters of support must be submitted at the same time and in the same format.