



PMI BOARD OF DIRECTORS APPLICATION

This information is for consideration for a position on PMI's Board of Directors. Please provide all information that will assist us in determining your qualifications and willingness to serve.

Name: _____ Title: _____

Company: _____

Mailing Address: _____

City: _____ State: _____ Zip code: _____

Office Phone: _____ Cell Phone: _____

Email: _____

QUALIFICATIONS OF APPLICANT: Please list boards and committees in which you serve, or have served. (business, civic, community, fraternal, political, professional, recreational, religious and social)

SKILLS, EXPERIENCE AND INTEREST: (Please indicate all that apply)

- | | |
|---|--|
| <input type="checkbox"/> Strategic Planning | <input type="checkbox"/> Advocacy/Government Affairs |
| <input type="checkbox"/> Personnel, Human Resources | <input type="checkbox"/> Outreach/Communications |
| <input type="checkbox"/> Administrative Management | <input type="checkbox"/> Technical |
| <input type="checkbox"/> Nonprofit Experience | <input type="checkbox"/> Other: |
| <input type="checkbox"/> Program Evaluation | |
| <input type="checkbox"/> Public Relations, Communications | |

Please explain why you would like to serve on the PMI Board of Directors.

List involvement with PMI thus far such as service on committees, presenting at conferences, writing articles or serving in other PMI leadership roles.

Have you attended a PMI Conference/Meeting? Yes No

If no, please provide a company or industry reference.

Will you be able to regularly participate in the work of the board including conference calls, in person board meetings and attending the PMI Conference? Yes No

Applicant Name: _____

Applicant Signature: _____ Date: _____

Please email or send a signed copy or an electronic copy with signature to:

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