



## PMI LEADERSHIP COMMITTEE APPLICATION

This information is for consideration for a chair position for a PMI Leadership Committee. 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: \_\_\_\_\_

**Please indicate the committee position which best relates to your representation.**

- Advocacy/Government Affairs Committee
- Allied Member Committee
- Commerce Committee
- Marketing
- Technical Committee
- Water Efficiency & Sustainability Committee

### QUALIFICATIONS OF APPLICANT:

Provide general knowledge and competence in the scope of the committee and reason for becoming a chair.

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



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Indicate number of years in the industry and involvement with PMI thus far in the Advocacy/Government Affairs, Allied, Commerce, Marketing and/or Technical Committees and PMI Conferences/Meetings.

Have you attended a PMI Conference/Meeting?  Yes  No

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Applicant Name: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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

Mr. Kerry Stackpole FASAE CAE  
**kstackpole@safep plumbing.org**  
1750 Tysons Boulevard, Suite 1500  
McLean, Virginia 22102  
Phone: (847) 481-5500