

WIB Committee Member Request for Appointment/Re-appointment Application 2021

FIRST AND LAST NAME:	TITLE:		
EMPLOYER/ORGANIZATION NAME:	List all Pima County Cities where office(s), clients, and/or customers are located in addition to Tucson:		
EMPLOYER MAILING ADDRESS:	ZIP CODE:		
WORK PHONE:	CELL PHONE:		
EMAIL:			
Name(s) and Title(s) to whom you report to and indicate if a Board of Directors or Government Authority:			
RECOMMENDED or NOMINATED BY (attach letter of support or nomination):			
IN-DEMAND INDUSTRY SECTOR TO BE REPRESENTED if applicable: <input type="checkbox"/> Aerospace & Defense, Manufacturing <input type="checkbox"/> Emerging Technologies <input type="checkbox"/> Health and Bioscience <input type="checkbox"/> Natural and Renewable Resources <input type="checkbox"/> Logistics-Supply Chain <input type="checkbox"/> Infrastructure			
See Six Target Sectors Defined by the WIB and if applicable, INDICATE SUBSECTOR: _____			
CATEGORY and SUBCATEGORY TO BE REPRESENTED: <input type="checkbox"/> Business Representative – <i>indicate if</i> <input type="checkbox"/> Large Private Business <input type="checkbox"/> Small Private Business (as defined by the U.S. Small Business Administration) Total Number of Employees: _____ *Business representatives must have Optimum Policy-Making or Hiring Authority as documented by job title (owner, chief executive officer, or chief operating officer) or provide written documentation (i.e., job description or letter describing Optimum Policy-Making or Hiring Authority) from the employer with this application. <input type="checkbox"/> Workforce (Labor Org Rep; Labor Org. Member or Training Director of Joint Labor-Management Apprenticeship Program; Community-Based Org) <input type="checkbox"/> Balance - Entity Administering Education and Training Activities (Title II; Higher Ed; Community College; Ed Agency; Comm-Based Org) <input type="checkbox"/> Optional - Governmental, Economic, or Community Development Entity (Title III; Title IV; Econ Development; or Public Assistance - Transportation, Housing - or Philanthropic Organization)			
ORGANIZATION AFFILIATIONS RELEVANT TO THE WIB and LOCAL WORKFORCE SYSTEM:			
WORKFORCE DEVELOPMENT EXPERIENCE, RESPONSIBILITIES, ACTIVITIES:			
PLEASE PROVIDE THREE TO FIVE WORDS THAT BEST DESCRIBE THE SKILLS YOU WOULD BRING TO THE WIB:			
WIB members are encouraged to participate in a standing committee. See attached Committee Descriptions and enter (1), (2), etc. to indicate preference order for COMMITTEE CHOICE: <table style="width:100%; border:none;"> <tr> <td style="width:50%; vertical-align: top;"> () Board Development – <i>member recruitment, orientation and education</i> () Performance and Accountability – <i>provides oversight of One-Stop system service providers, training providers and partners</i> () Planning – <i>assists with WIB planning processes, determines and recommends local economic data and target industry sectors</i> </td> <td style="width:50%; vertical-align: top;"> () Request for Proposal (RFP) Review– <i>(as needed) Review and evaluate responses to proposals for WIOA related solicitations</i> () Youth Council – <i>establishes and maintains relationships with employers and youth service organizations</i> For detailed descriptions go to WIB Webpage – Standing Committees </td> </tr> </table>		() Board Development – <i>member recruitment, orientation and education</i> () Performance and Accountability – <i>provides oversight of One-Stop system service providers, training providers and partners</i> () Planning – <i>assists with WIB planning processes, determines and recommends local economic data and target industry sectors</i>	() Request for Proposal (RFP) Review – <i>(as needed) Review and evaluate responses to proposals for WIOA related solicitations</i> () Youth Council – <i>establishes and maintains relationships with employers and youth service organizations</i> For detailed descriptions go to WIB Webpage – Standing Committees
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The following information is voluntary and requested to help ensure diversity & inclusion on the WIB. Please check all that apply: <input type="checkbox"/> Rural Resident <input type="checkbox"/> Anglo/Caucasian <input type="checkbox"/> African/American <input type="checkbox"/> Other Ethnic Origins <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Multi-ethnic/Multi-racial <input type="checkbox"/> Native American/Native Alaskan <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Male <input type="checkbox"/> Female			

Please provide your résumé, a one-paragraph biography and any additional supporting documentation.