



**Application for Appointment to the Shenandoah Valley Workforce Development Board**

**Nomination Requirements**

Business members may be nominated by a Chamber of Commerce within the region, a local or regional economic development office or agency, another business organization or association, or by a business. Nominations may come from one of these entities on behalf of an individual nominee or directly from the nominee.

Under the federal Workforce Innovation and Opportunity Act eligibility requirements for workforce development board business membership, business members can only be considered from among nominees who are:

- The owner, chief executive or operating officer with optimum policymaking or hiring authority. This may include department heads, division directors, or similarly situated positions;
- From a business that provides employment opportunities that, at a minimum, include high-quality, work relevant training and development in in-demand industry sectors or occupations in the local area; and
- From a business, that represents in-demand industry sectors or occupations in the region.

Business member representation shall include small and large businesses as defined by the U.S. Small Business Administration.

If you are interested in serving on the Shenandoah Valley Workforce Development Board or nominating someone to serve on the Shenandoah Valley Workforce Development Board, please print and complete this nomination assessment form. Return the signed form to: *Sharon Johnson, CEO, SVWDB, [sjohnson@vcwvalley.com](mailto:sjohnson@vcwvalley.com) or mail to SVWDB, c/o Sharon Johnson, 1076 Jefferson Highway, Staunton, VA 24401. The form may also be submitted to the local economic development office.*

This application will be forwarded on your behalf to the Chief Local Elected Officials for their consideration and final approval. Thank you for your interest in contributing to workforce development in the Shenandoah Valley.

**Nominee Information**                                      **Check one:    Term Renewal                      New Board Term**

Name of Business Person being nominated: \_\_\_\_\_

Address: \_\_\_\_\_  
(Address/City/State/Zip Code)

Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Nominee Characteristics**

**Gender (check one):** Male    Female    Other

**Race: (more than one may be checked)**    White    Black    Asian    American Indian or Native Alaskan

Native Hawaiian or Pacific Islander    **Ethnicity:** Hispanic, Latino, or Spanish origin?    Yes    No

