

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: *Joan Hollen, SVWDB, jhollen@vcwvalley.com or mail to SVWDB, c/o Joan Hollen, 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

