



CONFERENCE:	
1A _____	4A _____
2A _____	5A _____
3A _____	6A _____

COMMITTEE NOMINATION APPLICATION FORM

(Please submit to AIA via Facsimile 602.385.3779 or electronically to tcoady@aiaonline.org)

PLEASE PRINT (please use black ink) OR SUBMIT ELECTRONICALLY

COMMITTEE: _____ DATE SUBMITTED: _____

NAME OF INDIVIDUAL RECOMMENDED: _____

SCHOOL / POSITION: _____

NOMINEE'S ADDRESS AND TELEPHONE: _____

Business: Name: _____

Street: _____

City: _____ State: _____ Zip: _____

Business email: _____

Home: Street: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

I have contacted the above individual and he/she was advised he/she had been nominated for the above AIA committee and, if selected from all the nominees, he/she would be available to attend and serve as a working member.

SIGNATURE OF SUPERVISOR

TITLE / SCHOOL

QUALIFICATIONS OF INDIVIDUAL NOMINEE: (use reverse side or attach additional information if necessary)

1. Experience in field of nomination:

2. Nominee's interest, contribution or affiliation with your school and/or state association. (Explain)

In compliance with the AIA equity policy, please check all appropriate boxes:

Male Female Person of Color