



Application for Technical Advisory Group (TAG)

Technical Advisory Group(s) for which you would like to be considered:

(Please Print or Type)

Name, Address and Business Information

Name: <i>(First, Middle, Last)</i>		Title:	Mr.	Ms.	Mrs.
<i>Home Address:</i>		<i>Business Address:</i>			
<i>E-mail:</i>		<i>Business Phone:</i>			
<i>Current Employer:</i>		<i>Business Fax:</i>			
<i>Occupation:</i>					

Education and General Qualifications

Level	Name of School	Location (City, State)	Did you Graduate?	Type Degree(s)	Year Graduation/ Degree Awarded	Major Course of Study
<i>High School/GED</i>						
<i>College/Other</i>						
<i>Graduate/Postgrad.</i>						

Licenses held *(if applicable)*:

Special Skills and Qualifications *(e.g., LEED Certified, ICC Certified, etc.)*:

Community Activities/Organizational Affiliations *(e.g., ASME, AIA, etc.)*:

Declarations

Have you ever had a professional/occupational license revoked, or suspended, as a result of disciplinary action?				Yes	No
Are you a current employee of the District government?		Yes	No	Are you a current employee of the U.S. government?	
		Yes	No	Please list the board(s) or commission(s):	

(Note: You must also attach a current resume or biographical sketch to this application form.)

Signature: _____

Date: ____/____/____