



NOMINATION FORM

Region VI Workforce Development Board

WORKFORCE West Virginia USA

Please send a copy to: Region VI Workforce Development Board, 17 Middletown Road, White Hall, WV 26554

Name (First, MI, Last)		Title	(Agency/Business Name):
Street Address		WDB Sector Representation: a. Business _____ b. Organized Labor ** _____ c. Apprenticeship _____ d. Community Based Org. (CBO) _____ e. Ad Ed/Family Literacy _____ f. Higher Education _____ g. Economic Development. _____ h. Wagner-Peyser _____ i. DRS _____ j. Philanthropic Org. _____ k. Other _____	
City	County		
State	ZIP		
Home Phone (include area code)	Work Phone (include area code)		
FAX	Cell phone (include area code)		
E-Mail		Nomination <input type="checkbox"/> New <input type="checkbox"/> Reappointment	
Nominator <i>I hereby recommend the above named person for membership on the Local Workforce Development Board for Region VI service area.</i> _____ Signature Date _____ Printed/Typed Name & Title of Nominator _____ Nominator Organization _____ Phone FAX _____ E-Mail		** Organized Labor or Apprenticeship Organization: Please Specify local labor council or building and trades council of affiliation _____	
		Action by Local Elected Official Subject to certification required by Section 107 of the Workforce Innovation and Opportunity Act of 2014, the person nominated herein has been duly appointed to the Local Workforce Development Board by the Chief Elected Officials of Region VI. Term of Appointment: FROM _____ TO _____	
		Certification of Local Elected Official Chair _____ Signature of Chair Date	