



# APPLICATION

## ASSE Representative On Voluntary Consensus Standards Committee

Print legibly or type when completing this form.

Name \_\_\_\_\_ Tel. \_\_\_\_\_

Company \_\_\_\_\_ E-mail \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Committee Name: \_\_\_\_\_

Are you currently on this committee representing another organization?  Yes  No

If yes, list the Organization & Interest Category: \_\_\_\_\_

If you represent another organization on this committee and are selected to represent the ASSE, do you agree to allow the other ASSE representative to cast the vote so as not to create a conflict of interest?  Yes  No

Do you agree to notify the ASSE if you represent another organization on this committee at a later date?  Yes  No

Are you on other voluntary consensus standards committees?  Yes  No

If yes, list committee name including chairperson name, phone & e-mail, and secretary name, phone & e-mail for each committee.

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

References (List other ASSE members' name, phone & e-mail within the voluntary leadership that can provide references for you.)

_____	_____
_____	_____
_____	_____

Will your employer cover travel costs associated with attendance at committee meetings?  Yes  No

Signature (required) \_\_\_\_\_ Date \_\_\_\_\_

### ATTACH CV / RESUME AND OTHER RELATED DOCUMENTS TO THIS APPLICATION

Submit to: Practices & Standards Department  
American Society of Safety Engineers  
1800 E. Oakton Street  
Des Plaines, IL 60018-2187  
Tel: 847-768-3406  
Fax: 847-296-9221