## Program Advisory Committee Member Biographical Summary

Appointed position:	Date: Credentials:		
Name:			
Address:			
City:	State:	Zip Code:	
Home phone:	Business phone:		
Email:			
EDUCATION			
Institution:	Major:		
Degree Earned:	[	Dates Attended:	
City:		State:	
CURRENT EMPLOYER			
Facility name:	Position:		
Phone number:	I	Employment Dates:	
Address:			
City:	State:	Zip Code:	
Brief description of duties:			
PREVIOUS EMPLOYER			
Facility name:	Position:		
Phone number:		Employment Dates:	
Address:			

City:	State:	Zip Code:	
Brief description of duties:			
PREVIOUS EMPLOYER			
Facility name:	Position:		
Phone number:	Emj	ployment Dates:	
Address:			
City:	State:	Zip Code:	
Brief description of duties:			

## COMMUNITY/VOLUNTEER INVOLVEMENT

What was the committee's function?

What was your role on this committee?:

Number of years on this committee: \_\_\_\_\_

PAC Member Signature \_\_\_\_\_ Date \_\_\_\_\_

01.2023