



**PEO VOLUNTEER APPLICATION FORM – Page 1
COMMITTEE MEMBER CANDIDATE INFORMATION**

I wish to volunteer service on an association committee

I wish to nominate the following person for service on an association committee

PLEASE COMPLETE THIS FORM WITH ALL INFORMATION KNOWN TO YOU.

Applicant's Full Name:	
Applicant's Membership No:	
Discipline(s):	
Year Licensed:	
Designated Consulting Eng.:	
Buy/Sell Engineering Services:	
Preferred Email / Phone:	
Home Address:	
Home Phone Number:	
Home Email Address:	
Home Fax Number:	
Business Type:	
Business Title:	
Employer:	
Business Address:	
Business Email Address:	
Business Phone Number:	
Business Fax Number:	
Committee(s) You Would Like to Serve:	

Please return by email to: volunteering@peo.on.ca



**PEO VOLUNTEER APPLICATION FORM – Page 2
PROFILE INFORMATION**

This information is used to ensure that our committees are representative of our diverse membership, and that we have some idea of the special contribution that each candidate can make. This information is VOLUNTARY. LEAVE BLANK if you do not wish to answer.

Country of Education (degree, year of graduation, school):	
Age:	
Gender:	
Language(s) (Written/Spoken):	
Skills, Experience, Volunteer Work Relating to Committees of Interest:	
PEO Committee Experience:	
PEO Chapter System Experience:	
Other Volunteer Organizations:	
Days/hours Preferred for Committee Meetings:	
Nature of Proposed Contributions:	
Do you Know any Members of the Committee(s):	
List of three (3) References, preferably PEO Committee/Chapter System:	

Is your **RESUME** on file with us already? If not, or if the resume we have is out of date, please send us your current resume.

Applicant: _____
SIGNATURE (print first/last name): _____ DATE: _____

Nominator: _____
SIGNATURE (print first/last name): _____ DATE: _____

Membership No. _____

NOTE: Applicants who are nominated will be contacted prior to consideration to confirm interest and availability for committee service.

Please return by email to: volunteering@peo.on.ca