## NEW JERSEY BUILDING OFFICIALS ASSOCIATION, INC

Please complete this form and return it to the chairperson of the Nominating Committee by September 1 of the current year.

Applicants Name:		
Job Title:		
Position Seeking:		
Telephone #:	Cell:	E-Mail:
Number of Years as a Me	mber of NJBOA (BOA	NJ)
Number of years on the B	oard	
List all other boards and o	committees you have se	rved on:
Submit this form and you	r letter of intent along v	vith you resume' to the committee chairperson oted after September 1 <sup>st</sup> .
	Office Use	Only
Date Submitted:		
Approved:		
Disapproved	Re	eason