This form is to be used by individuals who wish to be considered for appointment to a committee of the New York State Association of Fire Chiefs. This document shall be submitted to the NYSAFC office. Also, please provide a current resume.

Date://			
Name:			
Address:			
City:	State:		Zip:
Home Phone: ()	Business Phone: ()	
Cell Phone: () Email:			
What committee are you seeking appointment to?:			
Current NYSAFC position (if applicable):			
Previous NYSAFC position(s) (if applicable):			
Other Organizational Affiliations:			
Education:			
Short statement on reason(s) for seeking this position:			