SOLE – The Inte	ernati	ona	I Soc	ciety	of	Log	istic	S				
NOMINATION FOR SOLE BOAR		RECTO	RS (Dire	 ctor at Larc	ne or l	Desiana	ted Posit	ion)				
YEAR: POSITION:												
	DISTRICT # DIRECTOR											
APPLICATION DIVISION DIRECTOR:												
FAMILY (LAST) NAME	FIRST NAME			Middle Initial TITLE (e.g., Dr., CO			· (01)					
							_ (e.g., Di	., 002)				
Address STREET			CITY	STA		ATE	E ZIP CODE					
							211 (JODE				
MO YE	District		Chapter		-	PL	Yes	No				
MOYR MEMBER No. DATE JOINED		APTER			(CITCIE CPL#	e one):						
correct as stated. Further, I understand and will meet any and all responsibilities (specifically stated and/or implied) of the candidate position, including serving on the Executive Board of Directors if subsequently elected. I hereby certify that I understand and will adhere to SOLE's Conflict of Interest Policy, Code of Ethics, and Ethics Policy; as well as comply with any and all statutory or regulatory requirements governing my service. I understand and agree that, should my position so require, I will sign and comply with any Confidentiality Agreement.												
DATE			SIGNATURE									
SUMMARY OF PROFE	SECTION 1: SUMMARY OF PROFESSIONAL EXPERIENCE (Civilian and/or Military)											
COMPANY/SERVICE	YEAI (from -		JOB POSITION/TITLE									

	NOMINATION FOR SOLE BOARD OF DIRECTORS					
YEAR:	POSITION:					
	DISTRICT # DIRECTOR					
	APPLICATION DIVISION DIRECTOR:					
SECTION 2:						
	LOGISTICS/LOGISTICS-RELATED ACTIVITIES (Professional, Community, Non-SOLE) D WORKS (Books/Monographs/Edited Works/Articles)					
CONFERE	NCE PRESENTATIONS					
TEACHING	G/TRAINING					
CONSULT	ING					
CERTIFIC	ATIONS/LICENSES/PATENTS, etc.					
PROFESS	IONAL AWARDS/RECOGNITIONS					
OTHER (n	ot covered, above)					
	SECTION 2.					
	SECTION 3: CONTRIBUTIONS TO SOLE (Non-Financial)					
CHAPTER						
DISTRICT						
DIOTRIOT						
NATIONA	_/INTERNATIONAL					
OTHER A	CCOMPLISHMENTS AND CONTRIBUTIONS (Please be specific)					

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ENTER NAME (Last, First) ON LINE BELOW

YEAR: POSITION: DISTRICT # DIRECTOR APPLICATION DIVISION DIRECTOR: SECTION 4: SUPPORT (Financial & Administrative, Corporate or Personally Funded) NOTE: THIS SECTION IS EXTREMELY IMPORTANT. Submission of this certified form assures that you had financial and administrative resources to fulfill the duties required of any position to which you are elected each candidate's responsibility to obtain an understanding from the Nominations and Elections Committee the responsibility to obtain an understanding from the Nominations and Elections Committee the responsibility on the position identified, prior to submission of this form. Lack of resources with which to execute the dutiposition will not relieve any elected/appointed director or officer from his/her fiduciary responsibilities to the Societar and the second second director or officer from his/her fiduciary responsibilities to the Societar and the second second director or officer from his/her fiduciary responsibilities to the Societar and the second director or officer from his/her fiduciary responsibilities to the Societar and the second director or officer from his/her fiduciary responsibilities to the Societar and the second director or officer from his/her fiduciary responsibilities to the Societar and the second director or officer from his/her fiduciary responsibilities to the Societar and the second director or officer from his/her fiduciary responsibilities to the Societar and the second director or officer from his/her fiduciary responsibilities to the Societar and the second director or officer from his/her fiduciary responsibilities to the Societar and the second director or officer from his/her fiduciary responsibilities to the Societar and the second director or officer from his/her fiduciary responsibilities to the Societar and the second	ed. It is sources ties of the	
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ADMINISTRATIVE SUPPORT (Clerical, Telephone, Postage, Administrative)		
MEETING ATTENDANCE (Note: SOLE's BOD currently meets in person twice yearly: the ExBOD four times Any/all absences		
fully justified and approved by the appropriate board. Proxies are not authorized.)	must be	
SECTION 5: FORMAL EDUCATION (High School, College, Other)		
SCHOOL/UNIVERSITY DATES ATTENDED	DEGREE/DATE [e.g. BS (Math), 1967]	
SECTION 6:		
OTHER ASSOCIATION/COMPANY DIRECTORSHIPS/OWNERSHIPS		
Display in this section <u>all</u> associations (both for-profit and not-for-profit) and/or companies (whether publicly/private in which you currently hold/held within the past 5 years either an officer/directorial position or an ownership inte		
in which you currently hold/held within the past 5 years either an officer/directorial position or an ownership inter ASSOCIATION/COMPANY NAME (status) [e.g., SOLE (501(c)(3); or Logistics Enterprise, Inc. [e.g., SOLE (501(c)(3); or Logistics Enterprise, Inc.		
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ENTER NAME (Last, First) ON LINE BELOW

NOMINATION FOR SOLE BOARD OF D					
YEAR:	POSITION:				
	DISTRICT # DIRECTOR				
APPLICATI	ON DIVISION DIRECTO	R:			
		SECTION 7:			
space provided, below.	than 200 words, based upon If you are put into nomination ed on the ballot that will be r	on by the Nominating Commi nailed to all Society member	ections above, <u>must</u> be provided in the ttee and approved as a candidate, the s in good standing at the time of ballot		
	distribution. (Note: All ent	ries are subject to administra	ative editing.)		
		SECTION 8:			
	MED	IA NOTIFICATION			
Please list the names and			rmed should you be elected. Include the		
	name, telephone number a	and email of the contact pers	on, if known.		
MEDIA		ADDRESS	Telephone No./E-mail		
			· · ·		
Please return this	s form together with an	y supporting documents	s and continuation sheets to:		
		tions & Election Commit			
		rnational Society of Log ssional Place, Suite 111	ISTICS		
		, MD 20785-2229 USA			
	•				
		-	nuation sheets are attached. ed/evaluated by the committee.		
meen cet ronnis en			carevandated by the committee.		
	Questions regarding	ng the form can be submitt	ed by:		
	•	ione – (301) 459-8446			
	Facsi	mile- (301) 459-1522			
	E-mail	: solehq@erols.com			
			ITEMENT TO THE SOCIETY.		

CONTINUATION SHEET #_____