Application for NIFA Council Representative

NIFA Council members are expected to attend the three scheduled council meetings annually. The three meetings are: Fall Business meeting; Mid-winter Business meeting; and SAFECON. NIFA does not have funds to support the travel of the council members, therefore council members or their school/employer are expected to cover all such expenses.

Attach a short biography or a copy of your vitae to this application along with a color photograph suitable for publication (minimum size of 2" x 3").

The completed application should be printed and returned to:

NIFA National Headquarters 2160 West Case Rd., #7 Columbus, OH 43235

		Please Print	
Full N	lame:		
Home Add			
Tiome Auc	JI 655.		
Р	hone:	·	
E	Email:		
Emp	loyer:		
	Title:		
Work Add	dress:		
			•
	l	4	
P	hone:	ext	
Regio	on, ber-at-lar	ich you are applying: Elected Regional Representative (insert the region number in the spage Representative in a NIFA regional or national SAFECON? Yes, No.	
YEAR		EVENTS	
Are you now or l	have you	ever been a licensed civilian or military pilot? Yes N	No
		onal or national SAFECON within the last 5 years? Yes g questions if possible.	No

Check which of the following <u>national</u> SAFECON judging positions which you have held (if any)

Chief Judge	Safety Judge
Associate Chief Judge	Staging Officer
Scorekeeper	Chief Navigation Judge
Assistant Scorekeeper	

Check which of the following regional SAFECON judging positions which you have held (if any)

Chief Judge	Safety Judge
Associate Chief Judge	Staging Officer
Scorekeeper	Chief Navigation Judge
Assistant Scorekeeper	

Have you ever served as a flight team advisor? ____ Yes, ____ No. If yes, complete the following: (Advisors are the official contact for the flight team as approved by the institution they represent and have the authority to make decisions on behalf of the member institution. They may or may not be involved with actively coaching a team)

From Month / Year	To Month / Year	LOCATION

Have you ever served as a flight team coach? ____ Yes, ____ No. If yes, complete the following: (Coaches are not listed with the institution as the official contact for the team. They may or may not be employees of the institution, but they must have the authority to act on behalf of the institution.

From Month / Year	To Month / Year	LOCATION

Please list all institutions of higher learning which you have attended and the dates of attendance.

From Month / Year	To Month / Year	INSTITUTION

Answer the following questions:

Yes No	Are you registered with or have obtained an exemption from any state or agency for soliciting on behalf of a non-profit organization?
Yes No	Have you ever solicited funds in any state on behalf of a non-profit organization?
	If you answered "Yes" to either of the preceding two questions, list all states where registered, exempted, or where you or your non-profit organization solicited, including registering agency, dates of registration, registration numbers, any other names under which the organization was/is registered, and the dates and type (mail, telephone, door to door, special events, etc.) of the solicitation conducted in appendix A of this application.

Answer	the	follow	/ina	question
,				94000.0

Yes No	Have you ever been convicted of a misdemeanor or felony? (If yes, include a complete
163 140	explanation in appendix B of this application.

Answer the following questions:

Yes No	Have you ever been enjoined or otherwise prohibited by a government agency/court from soliciting funds for a non-profit organization?
Yes No	Have you ever been a member of a governing board of a non-profit organization which has had its charitable registration denied or revoked?
Yes No	Have you ever been the subject of a proceeding regarding any solicitation or registration for a non-profit organization?
Yes No	Have you ever entered into a voluntary agreement of compliance with any government agency or in a case before a court or administrative agency?
Yes No	As a member of a non-profit board, have you ever Applied for registration or exemption from registration (but not yet completed or obtained)?
Yes No	If you have answered "Yes" to any of the above questions, give an explanation in appendix C of this application.

Answer the following questions:

Yes No	Are you related by blood, marriage, or adoption to: (i) any other officer, director, trustee or employee OR (ii) any officer, agent, or employee of any fundraising professional firm under contract to NIFA OR (iii) any officer, agent, or employee of a supplier or vendor firm providing goods or services to NIFA?
Yes No	Do you have a financial interest in a business described in (ii) or (iii) above OR, serve as an officer, director, partner or employee of a business described in (ii) or (iii) above?
	If you answered "Yes" to either of the preceding questions, specify the relationship and provides the names, businesses, and addresses of the related parties in appendix D of this application.

I affirm that the information I have provided	to be the complete and accurate.	
Signature	 Date	

[continued on next page]

Appendix A

Enter information here:	

Appendix B

nter explanation here:	

Appendix C

Enter explanation here:	

Appendix D

Enter information here:	