

Credential Maintenance Working Group Nomination Form

Information about you, the nominator		
1. Name	Your first and last name.	
2. E-mail Address	Your e-mail address.	
3. Phone Number	Your phone number.	
4. Employer	Who you work for or represent.	
Information about the person you are nominating, the nominee <i>(provide as much detail as possible)</i>		
5. Name	Nominee's name.	
6. E-mail Address	Nominee's e-mail address.	
7. Title	Nominee's business title.	
8. Employer	Who the nominee works for or represents.	
9. Job description	Brief explanation of the nominee's responsibilities.	
10. Additional Contact Information	Telephone number and mailing address.	
11. Experience	Lifetime experience relative to system operations, operations training, operations management, and/or exam writing.	
	The nominee commits to:	

<p>12. Willingness to serve, and additional information</p>	<p>a. What subject matter expertise do you bring to the CMWG?</p> <p>b. What is your knowledge of real time system operations?</p> <p>c. Are you willing to attend and participate in all CMWG meetings?</p> <p>d. In what way will you express your professional opinion as well as the opinions of the certified body you represent?</p> <p>e. As a volunteer, are you willing to devote whatever time is required to complete CMWG assignments?</p>	
	<p>The nominee has read and agrees to abide by all parts of the Credential Maintenance Working Group Scope.</p>	<input type="checkbox"/> Yes
	<p>Additional information about the nominee that would help the nominating task force decide to elect this person.</p>	
<p>Please provide any additional information that would facilitate the Nominations Task Force's decision to elect this person:</p>		
<p>Selected candidates will receive an invitation for a phone interview with the Nominations Task Force. Please provide best times to contact you/the candidate.</p> <p><u>Preference 1:</u></p> <p><u>Preference 2:</u></p> <p><u>Preference 3:</u></p>		

How to submit your nomination:

1. Save a copy of your nomination form for your records.
2. Send this form by e-mail to <mailto:Valenche.Cartledge@nerc.net> as an attachment.

For more information contact [Valenche` Cartledge](#) (via email), or by phone at 404-446-9635