



WASHINGTON STATE
*Association of
Permit Technicians*

Nominations for WSAPT Leadership

Thank you for your interest in a leadership position with the Washington Association of Permit Technicians. WSAPT would not be the successful organization and ICC Chapter it is without the support of its members, volunteers, and leaders.

Application for WSAPT Executive Board

Name: _____

Title: _____

Jurisdiction: _____

Address: _____

City/State/Zip: _____

Phone: _____

Email: _____

Elected Positions (2-year term)

President

Treasurer

Member At Large

Vice-President

Recorder

I am applying for the position indicated above and understand there is a time commitment involved in serving WSAPT membership in this capacity and have my jurisdiction's and/or my supervisor's support to participate. I understand that I will be expected to maintain an active membership as a Governmental Voting member and attend the Spring and Fall conferences, monthly Board meetings, annual Board retreat, and participate via emails and/or teleconferences.

Signature of Applicant: _____

Date: _____

For questions or to return the form: info@wsapt.org or

WSAPT c/o Becky Scheffer 4800 SW 188th Street, SeaTac, WA 98188