

Administrative & Professional Assembly Know Your Nominees - Bio Form

Name: _____ Years of employment at Auburn: _____

Current Position Title: _____

Address: _____

Campus Email Address: _____

Phone Number: _____

Brief description of current job duties:

[illegible]

A&P or University Committee Information

List current committee(s) & end of committee term

Name

Term

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List previous committee(s) and years or service

Name

Term[illegible]

Which Place (1-18) would you represent: _____

Please share your thoughts and ideas about topics and initiatives that the A&P Assembly should champion, support or take a stance on.

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If you need any further information regarding a committees obligations or purpose, please contact the Chair of the Administrative and Professional Assembly or the Nominations and Elections Chair.

Supervisor Approval:

I _____, the supervisor for the nominated candidate above, confirm that they are in good standing in terms of the performance management system and that we have had a discussion regarding the time commitment of the positions that this employee is nominated for and come to an agreement about how their assigned duties will be accomplished with them taking on these extra responsibilities outside of their regular job.

Signature

Date