*Staff Council Representative*

*Know Your Nominees – Bio Form*

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Years of employment at Auburn:\_\_\_\_\_\_\_\_\_

Current Position Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Campus Address (College/Department):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Campus email address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_@auburn.edu Phone:\_334-844-\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Brief description of current job duties:

**Staff or University Council Committee Information**

Committee descriptions may be found: <https://www.auburn.edu/administration/president/univcomm/index.html>

If you need additional information regarding a committee’s obligations or purpose, please contact the Chair of Staff Council or the Chair of the Nominations Committee.

What do you currently see as priorities for the Staff Council during your term?

Supervisor Approval:

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, supervisor of 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 position(s) for which this employee is nominated and have come to an agreement about how their assigned duties will be accomplished with the addition of these extra responsibilities in addition to their regular job.

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Signature Date

Please scan and email signed form to: [gmw0002@auburn.edu](mailto:gmw0002@auburn.edu) and [staffcn@auburn.edu](mailto:staffcn@auburn.edu)

DEADLINE: May 30, 2025