



Workforce Development

NOMINATION FORM FOR WORKFORCE DEVELOPMENT BOARD

As mandated by the Workforce Innovation and Opportunity Act of 2014 (WIOA) (P.L.113-128), individuals representing the Business, Labor Organization, Adult Education and Literacy or Higher Education sectors on the Workforce Development Board (WDB) must be nominated by qualified organizations, as detailed below. To be considered for appointment to the WDB as a Business, Labor Organization, Adult Education and Literacy or High Education representative, applicants must submit this completed Nomination Form, along with their completed Application to the County of San Bernardino Workforce Development Department. All appointments to the WDB are made by the County of San Bernardino Board of Supervisors (Board). Organizations may nominate more than one candidate for the Board’s consideration.

Nominee (Applicant) Name: _____

Nominee Phone Number: _____

WDB Membership Category (check one):

Business Labor Organization Adult Education and Literacy Higher Education

Nominee Employer: _____

NOMINATING ORGANIZATION: Complete this section and return this form to the Nominee for submission to the County of San Bernardino.

Organization: _____

Contact Name and Title: _____

Address: _____

Phone: _____ Email: _____

We hereby nominate the above-named Nominee in the Membership Category indicated and, by signature below, certify the following (one or more categories may be selected, as appropriate):

- Business:**
 - o We are a local business organization and/or business trade association.
 - o Nominee is (i) the owner, chief executive or operating officer with optimum policy-making or hiring authority; (ii) from a business that provides employment opportunities in the region (employees other than the owner) that include, at a minimum, high-quality, work-relevant training and development; and (iii) from a business that represents in-demand industry sector(s) or occupation(s) in the local area.
 - o Nominee (check one) DOES –or- DOES NOT represent a small business as defined by the U.S. Small Business Administration.

Labor Organization:

- We are a local labor federation.
- Nominee is a representative of a labor organization.

Adult Education and Literacy:

- We are an eligible provider administering adult education and literacy activities under Title II of WIOA.
- Nominee is a representative of an eligible provider administering adult education and literacy activities under Title II of WIOA.

Higher Education:

- We are an institution of higher education providing workforce investment activities (including community colleges).
- Nominee is a representative of an institution of higher education providing workforce investment activities (including community colleges).

I certify, under penalty of perjury, that all of the above is true and correct and that I have the authority to make this nomination on behalf of the organization named above. This Nomination Form may be subject to public disclosure.

Authorized Signature of Nominating Organization

Date

Print Name

Title

INSTRUCTIONS FOR WDB APPLICANT.

- Submit this completed Nomination Form, along with your completed Application, to the County of San Bernardino Workforce Development Department, Attn: Kristi Sandberg ksandberg@wdd.sbcounty.gov or by mail at 215 N. D Street, San Bernardino, CA 92415 by September 18, 2015.
- The County shall not accept incomplete Applications (e.g., Nomination Form without Application; Application without Nomination Form).
- The County shall not accept Nomination Forms directly from Nominating Organizations.