

**Commonwealth of Virginia  
Workforce Investment Act**



**NOMINATION FORM B  
Local Youth Council**

<b>1-Name</b> ( <i>First, MI, Last</i> )		<b>2-LWIA Board Name</b>	<b>3-Date</b>
<b>4-Street Address</b>		<b>13-Nominee Characteristics</b> <b>Gender:</b> Male <input type="checkbox"/> Female <input type="checkbox"/> <b>Race:</b> White <input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> Amer. Indian <input type="checkbox"/> Native Alaskan <input type="checkbox"/> Asian <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other <input type="checkbox"/>	
<b>5-City</b>	<b>6-County</b>		
<b>7-State</b>	<b>8-ZIP</b>		
<b>9-Home Phone</b> ( <i>include area code</i> )	<b>10-Work Phone</b> ( <i>include area code</i> )		
<b>11-FAX</b>	<b>12-E-Mail</b>		
<b>15-Local Board Member/Youth Expertise or Interest Representative</b> Nominee's Title _____  Organization/Business _____  Type of Business _____		<b>14-Recommended for</b> ( <i>see section number</i> ) 15-Board Member/Expertise/Interest <input type="checkbox"/> 16-Youth Service Agency <input type="checkbox"/> 17-Housing Authority/Tenant Org. <input type="checkbox"/> 18-Parent (of eligible youth) <input type="checkbox"/> 19-Former Youth Participant/Org. w/Exp. <input type="checkbox"/> 20-Job Corps, as appropriate to area <input type="checkbox"/> 21-Optional <input type="checkbox"/>	
<b>16-Youth Service Agency Representative</b> <i>(including juvenile justice/law enforcement)</i>  Nominee's Title _____  Youth Organization _____		<b>17-Local Housing Authority or Tenant Organization Representative</b>  Nominee's Title _____  Youth Organization _____	
<b>18-Parent of Eligible Title I WIA Youth Representative</b>  _____ <p align="center">Name of Eligible Youth</p>		<b>19-Former Youth Participant or Organization with Youth Services Experience Representative</b>  Title _____ Organization _____ Type of Business _____	
<b>20-Job Corps Representative</b>  Title _____ Organization _____  _____ <p align="center">Office Location Serving the LWIA</p>		<b>21-Optional Representative</b>  Nominee's Title _____  Youth Organization _____	
<b>23-Nominator</b>  <i>I hereby recommend the above-named person for membership on the Local Workforce Investment Board for LWIA #_____.</i>  <hr/> <i>Signature</i> <span style="float:right"><i>Date</i></span>  <hr/> <i>Printed/Typed Name &amp; Title of Nominator</i>  <hr/> <i>Nominator Organization</i>  <hr/> <i>Phone</i> <span style="float:right"><i>FAX</i></span>  <hr/> <i>E-Mail</i>			