## State Assembly Curriculum Vitae Form

Association of Surgical Technologists State Assembly • www.ast.org 6 West Dry Creek Circle • Suite 200 • Littleton, C0 80120-8031

Submit this form to your State Assembly, not AST.

Appointed position: $\qquad$ Date: $\qquad$
Name: $\qquad$ Certification number: $\qquad$
Address: $\qquad$
City: $\qquad$ State: $\qquad$ Zip Code: $\qquad$
Home phone: $\qquad$ Business phone: $\qquad$
Email: $\qquad$

## EMPLOYMENT

Facility name: $\qquad$
Phone number: $\qquad$ Number of years employed: $\qquad$
Address: $\qquad$
City: $\qquad$ State: $\qquad$ Zip Code: $\qquad$
Brief description of duties:
$\square$

## AST INVOLVEMENT

Number of years in AST: $\qquad$
Past positions held within AST/State Assembly: $\qquad$
Brief description of your role in these positions:

## OTHER ORGANIZATIONAL INVOLVEMENT: HOSPITAL/WORK COMMITTEES

What was the committee's function?:
$\square$
What was your role on this committee?:
$\square$
Number of years on this committee: $\qquad$

## COMMUNITY/VOLUNTEER INVOLVEMENT

What was the committee's function?:
$\square$
What was your role on this committee?:
$\square$
Number of years on this committee: $\qquad$
How do you see your role in the leadership of AST/your state assembly:
$\square$

Do you have specific skills such as computer skills, writing, which will help you in your leadership duties?NoYes Please list them:
$\square$
How would you resolve a conflict with another person?:
$\square$
Please list references here:
$\square$
Please attach a current resume, copies of diplomas, certificates, outstanding achievements, citations, here

## EMPLOYER

$\square$ If this employee is appointed to a state assembly office, I will make reasonable efforts to grant the minimum leave time to allow him/her to fulfill the obligations of the position: a minimum of one week for the national annual conference, several weekends for workshops, and the state annual meeting (dates unknown at this time).

Employer Signature $\qquad$ Date $\qquad$
Applicant Signature $\qquad$ Date $\qquad$

This curriculum vitae form will be discarded two years from date of receipt. If after that time you remain interested in working with your State Assembly you must submit a new consent-to-serve form and cv .

