

**Mayor's Council on Disability Issues (CODI)
Officer and New Member Nomination Form**

*If nominating a new member, please remember: CODI has five regular meetings, six tapings and one all-day retreat where attendance is expected. Please confirm nominee's willingness to make this commitment.

NOMINEE INFORMATION

Name:

Organization:

Title:

Address, including Zip Code

Home Phone Number:

Work/Cell Number:

Email Address:

Disability/Population Represented:

Describe what this person can bring to CODI (i.e. experience, professional/personal interest in disability issues, etc.) and attach resume or bio.

*If nominating an Officer, please explain why you feel nominee will make a good Chair/Vice Chair/Secretary:

***Attach additional paper if necessary.*

Person Making Nomination

Daytime Phone:

Email:

Relationship to nominee:

How did you learn about CODI?

Nomination Forms may be sent via fax, mail or email to:

CODI Chair or Stephanie Cook, City Liaison
400 Main Street, Suite 515, Knoxville, 37902
scook@cityofknoxville.org

865-215-2034 Voice
865-215-2962 Fax
865-215-4581 TTY

Nomination Forms must be received by Tuesday, April 9, 2013.