LOCAL EMERGENCY PLANNING COMMITTEE
NOMINATIONS FORM

This form is to be used for nominations to the Region I Local Emergency Planning Committee required by Section 301 (c) of SARA Title III. Emergency Planning and Community Right-to-Know Act of 1986.

Categories of Representation on LEPC
(Check One)

LEPC Chairperson
Administering Agency
Community Groups
Environmental
Law Enforcement
Ad Hoc 1: Schools

LEPC Chairperson
Administering Agency
Community Groups
Health
Law Enforcement
Ad Hoc 1: Schools

Agriculture Civil Defense
Elected Official Emergency Mgt.
Fire First Aid
Hospital Industry
Media Transportation

Name______________________________________
Home Address______________________________
Employer __________________________________
Work Address _______________________

Telephone No._______________
Title_________________________
Telephone No.________________

Use separate sheet if more space is needed to provide any information requested below:

1. Educational Background:

2. Occupational Experience:

3. Professional or Technical Organization Membership:

4. Civic or Community Experience Memberships or Previous Public Service Appointments

5. Experience or Special Knowledge Pertaining to Area of Interest:

Revised: 02/18/16
For use by Staff only: Date Submitted to LEPC _____ Action Taken: Approve___ Not Approved ___ No Action_