# Standing Committee Application

AAMVA has three standing committees – Driver, Vehicle, and Law Enforcement. Each committee consists of representatives of each of the nine disciplines of AAMVA: driver, fraud, ID management, information technology, legal services, law enforcement, motor carrier services, public affairs and consumer education, and vehicle.

The **Driver Standing Committee** works across all disciplines to assist member jurisdictions and the other standing committees by improving and promoting safety, security, and service within driver programs through education, leadership, communication, and the development of uniform practices.

The **Vehicle Standing Committee** will identify, develop, and champion vehicle safety and consumer protection initiatives and promote reasonable and uniform best practices and laws throughout member jurisdictions.

The **Law Enforcement Standing Committee inspires** collaboration between law enforcement and driver/motor vehicle administrators to improve highway and public safety.

Each committee sponsors working groups which develop best practices, standards, model laws, and other guidance that assist member jurisdictions with operational and policy issues.

The expectation is that, if selected for a standing committee, you will be able to attend the two in-person Combined Standing Committees Meetings and the Workshop & Law Institute, typically October and March respectively. Currently, AAMVA provides funding for attendance at the Combined Committees Meeting (October) and the Workshop & Law Institute (March). Funding includes airfare, hotel, and per diem.

If you would like to serve on a committee, **please complete this form and provide a brief resume** and send both to committees@aamva.org.

Applications for those not able to be placed on a committee immediately will be kept on file for future consideration should vacancies arise.

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| CONTACT INFORMATION |
| Name: Click here to enter text. | Title: Click here to enter text. |
| Organization: Click here to enter text. |
| Street Address: Click here to enter text. |
| City: Click here to enter text. | Jurisdiction: Click here to enter text. | Postal Code: Click here to enter text. |
| Email: Click here to enter text. | Phone: Click here to enter text. |
| PROGRAM AREA EXPERTISE |
| Tell us what program area/discipline/specialty you represent: |
| [ ]  Driver | [ ]  Information Technology | [ ]  Motor Carrier Services |
| [ ]  Fraud | [ ]  Legal Services | [ ]  Public Affairs & Consumer Education |
| [ ]  ID Management | [ ]  Law Enforcement | [ ]  Vehicle |
| **Please indicate your area of expertise and whether you have operational or policy experience, or both. Include your experience in each area of expertise to provide details that make you qualified for the role.**  |
| **Area of Expertise***Please check all that apply.* | **Operational****Experience** | **Policy****Experience** | **Experience/Comments** |
| [ ]  | **Driver** |  |  |  |
| [ ]  Driver Improvement | [ ]  | [ ]  | Click here to enter text. |
| [ ]  GDL | [ ]   | [ ]   | Click here to enter text. |
| [ ]  License Examination CDL | [ ]   | [ ]   | Click here to enter text. |
| [ ]  License Examination Non-CDL | [ ]   | [ ]   | Click here to enter text. |
| [ ]  I am a DMV investigator, but not a sworn/commissioned investigator | [ ]   | [ ]   | Click here to enter text. |
| [ ]  | **Law Enforcement** |  |  | Click here to enter text. |
| [ ]  Auto Theft and other Auto related crimes | [ ]   | [ ]   | Click here to enter text. |
| [ ]  Commercial Motor Vehicle Enforcement | [ ]   | [ ]   | Click here to enter text. |
| [ ]  Driver License Administration | [ ]   | [ ]   | Click here to enter text. |
| [ ]  ID Theft/Fraud | [ ]   | [ ]   | Click here to enter text. |
| [ ]  I am a sworn/commissioned DMV investigator | [ ]   | [ ]   | Click here to enter text. |
| [ ]  I am a State Police/Patrol/RCMP officer | [ ]   | [ ]   | Click here to enter text. |
| [ ]  I am a State Police/Patrol/RCMP employee | [ ]   | [ ]   | Click here to enter text. |
| [ ]  | **Vehicle** |  |  |  |
| [ ]  Dealer Regulation | [ ]   | [ ]   | Click here to enter text. |
| [ ]  Fraud | [ ]   | [ ]   | Click here to enter text. |
| [ ]  Inspection | [ ]   | [ ]   | Click here to enter text. |
| [ ]  Motor Carrier | [ ]   | [ ]   | Click here to enter text. |
| [ ]  Registration | [ ]   | [ ]   | Click here to enter text. |
| [ ]  Title | [ ]   | [ ]   | Click here to enter text. |

**Please provide a brief resume below or attach a separate file (limit to 500 words)**

Click here to enter text.

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| **As applicant,** I affirm that I meet the qualifications and am willing to serve if selected.

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| Applicant Name (printed): | Click here to enter text. |
| Applicant Signature: | Click here to enter text. | Date: Click here to enter text. |

**As supervisor,** I authorize this applicant to serve if selected and I understand and support the applicant traveling to working group meetings and select AAMVA conferences. And as much as possible, to other conferences and meetings as needed to represent the working group. |
| Supervisor Name (printed): | Click here to enter text. |
| Supervisor Signature: | Click here to enter text. | Date: Click here to enter text. |

**As chief administrator,** I authorize this applicant to serve if selected and I understand and support the applicant traveling to working group meetings and select AAMVA conferences. And as much as possible, to other conferences and meetings as needed to represent the working group.

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| Chief Administrator Name (printed): | Click here to enter text. |
| Chief Administrator Signature: | Click here to enter text. | Date: Click here to enter text. |

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| OUR POLICY |
| It is the policy that all applicants must obtain the permission of their supervisor and chief administrator prior to submitting the application. **INCOMPLETE APPLICATIONS or APPLICATIONS NOT INCLUDING A SIGNATURE OR ACCOMPANYING AUTHORIZATION WILL NOT BE ACCEPTED.** Electronic signatures are acceptable. |

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Please return completed form to Member Services at committees@aamva.org