

YOUNG CAREERIST BIOGRAPHICAL INFORMATION

This biographical information will be used as part of the judging process at the **BPW/OHIO Competition** for all Young Careerist Representatives. You may attach additional sheets as necessary; **the total number of pages for the biographical information is six (6)**, including any attached additional sheets.

PERSONAL DATA

Name: _____ Date of Birth: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Email address: _____

EMPLOYMENT

Present Position: _____ From: _____ To: _____
If not presently employed, please describe last employment)

Employer: _____

Address: _____

Job Title: _____

Job Description:

Second Position: _____ From: _____ To: _____

(If you are presently employed with two different employers, please list the second position in this space If you have only one position, leave this area blank.)

Employer: _____

Address: _____

Job Title: _____

Job Description:

EDUCATION

Please note all educational degrees/diplomas and major areas of study after high school.

SCHOLASTIC HONORS/PROFESSIONAL OR PERSONAL AWARDS

PRESENTATIONS, PUBLICATIONS. PAPERS PRESENTED. SPEECHES GIVEN

COMMUNITY INVOLVEMENT

CAREER GOAL: Where do you see yourself 5-10 years from now?

MEMBERSHIPS

Name of your Local and Region:

Membership in other organizations:

ESSAY QUESTION

Please answer the following task and attach your response to the completed Biographical Information Sheet.

Take one issue from the BPW/OHIO's legislative platform and lobby for that issue. Your audience is a U.S. senator whose voting record opposes the issue you have selected. You have only one typed page (Times Roman. 12pt) to convince the Senator to reconsider her/his position.

INFORMATION FOR PUBLICITY PURPOSES:

A news release announcing your participation in the Young Careerist Program may be sent out. For this purpose, please provide the names, addresses and telephone/fax numbers and e-mail addresses of your local newspapers, television and radio stations.

WEB SITE PERMISSION

You have my permission to use my name, profession, address, phone, fax contacts and email address on the BPW/OH web site that offers the brief information on State Young Careerist Representatives. I also give permission to use my photo.

Check for "yes" or "no" and please "initial": _____ Yes _____ No _____ (initial)

Signature: _____ Date: _____