|  |
| --- |
| **2020 PMI CIC Volunteer Form**  |
| **Name**:  | **Phone:** | **E-mail**: |
| **Are you a current PMI Member?**  | **CIC Member?**  | **PMI #:** |
| **Briefly tell us about yourself**:  |
| **Please provide a short summary of your project management experience:**  |
| **Key Skill Sets/Qualifications/Special Knowledge**: |
| **Areas of interest** (include goals of volunteerism, e.g. looking for mentoring, Collaborate to Succeed, Professional Development Day, Board of Directors, etc.): |
| **Anticipated Availability**  | Start Date: | End Date: |
| **Time Commitment** | Hours/week: | Hours/mo:  |
| **Please return this completed form to**: **dirvolunteerism@pmi-centraliowa.org** |