|  |  |  |  |
| --- | --- | --- | --- |
| **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**](mailto:dirvolunteerism@pmi-centraliowa.org) | | | |