(Version: November 2021)

The Department of Energy (DOE) Environmental Management (EM) Site-Specific Advisory Board (SSAB or Board) provides meaningful opportunity for collaborative dialogue among the diverse communities at clean-up sites. The Board is federally-chartered to provide advice and recommendations concerning the following EM site-specific issues: clean-up activities and environmental restoration; waste and nuclear materials management and disposition; excess facilities; future land use and long-term stewardship; risk assessment; and communications.

The Board's membership is carefully considered to reflect a full diversity of viewpoints in the affected community and region.

Currently, the EM SSAB comprises eight local boards, which are located near DOE sites across the country: Hanford, Idaho, Nevada, Northern New Mexico, Oak Ridge, Paducah, Portsmouth, and Savannah River. If appointed, you will be serving on the

Members appointed by DOE to serve on the EM SSAB are subject to conflict-of-interest principles in order to maintain the integrity of the EM SSAB's work.

### **Membership Terms**

- 1. EM SSAB members are appointed for a two-year term. Appointments may be renewed twice for a maximum period of service of six years.
- 2. EM SSAB members are not compensated for their service.
- 3. DOE provides reimbursement for authorized travel and subsistence (federal per diem) expenses for eligible members.
- 4. You must be a U.S. Citizen or a legal resident to serve on the EM SSAB.
- 5. U.S. federal government employees are ineligible to serve on the EM SSAB.

**HOW TO APPLY:** If you would like to be considered for membership on the EM SSAB, please complete this application and submit it and your resume, if available, to the contact listed below. For more information on the EM SSAB, visit <a href="http://energy.gov/em/services/communication-engagement/em-site-specific-advisory-board-em-ssab">http://energy.gov/em/services/communication-engagement/em-site-specific-advisory-board-em-ssab</a> or the website for your local board,

#### Please send your application to:

NOTE: The EM SSAB membership application process can take several months; please contact your local EM SSAB office for more details.



(Version: July 2021)

<b>Application No. (Agency Us</b>					
Last Name	F	irst Name		Mid	dle Initial
	Н	ome Address			
City	County	y	State		Zip
	Mailing Address (if	different from Home	Address)		
City	County	ý	State		Zip
Primary Phone: Alternate Phone: bome □ work □ cell □ home □ work □ cell					
E-mail:					
Occupation Employer Date		Dates o	f Empl	ovment	
•		•		•	•
☐ No longer employed ☐ R (If currently not employed or re		ecupation, employer, a	and dates of en	nploym	ent above)
Are you an employee of a DOE If yes, select which:	Contractor or Subc	ontractor? Subcontractor	Y	es	No
Are you a Consultant to DOE o If yes, select which:	r one of its Contract Contractor	ors or Subcontractors' Subcontractor	? Y	es	No
Do you work for a Waste Mana	gement/Environme	ntal Restoration Firm	for DOE? Y	es	No
Are you a registered Federal lol	obyist?		Y	es	No



(Version: July 2021)

Application No. (Agency Use Only)
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#### Why do you want to serve on the EM SSAB?

The EM SSAB is chartered under the Federal Advisory Committee Act and, as such, must represent a diversity of views. Toward better understanding the reasons that have led you to apply for membership on this board, please indicate below your primary interest(s) or the perspective that you believe you most represent.

\*Please select two categories and provide a brief explanation for each.\*

	•	• •		
Primary Interest 1				
Brief Explanation:				
Primary Interest 2				
Brief Explanation:				

Please list all groups or organizations that you currently belong to and the dates of membership. Specify if you hold an office, chair a committee, etc. The EM SSAB is looking for members from organizations including, but not limited to, the following: County/City/Tribal governments, public or private educational institutions, minority groups, labor organizations, civic groups, environmental groups, public health and health care organizations, business groups, neighborhood groups.

Note: Membership in an organization is NOT a requirement for membership in the EM SSAB.



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Please list any degrees or certifications you hat background is NOT required for board membra diversity of opinions and experiences.			
Diversity Information (optional) To ensure boards mirror communities near the certain cultural and geographic information at purpose only. Race/Ethnicity:			
Causcasian African American	Hispanic or Latino	Native American	Asian-American
□ Other			
Gender: M □ F □	Age: ☐ Under 30	) □ 30-45 □ 45-65	□ Over 65
How did you hear about the EM SSAB? (	Check all that apply.)		
☐ Newspaper advertisement Name of newspaper	☐ Radio adverti	sement io station	
□ EM SSAB website	Name of rad		
☐ E-mail Announcement	☐ DOE Mailing	SS	
☐ Other (please explain)			
			====
Membership Commitment			
If selected to serve on the EM SSAB, I ag including attending board meetings and working cooperatively with the members membership is for the benefit of the conprogram.	related training events, rev ship to fulfill the purpose o	viewing background mat of the board. I also unde	erials, and erstand that my
Print Name	Signature	Date _	
			4

