

Washington State Building Code Council

### 2024 TECHNICAL ADVISORY GROUP RECRUITMENT

# WHEN January 25, 2024 through February 25, 2024

Persons applying for a TAG position must submit the application (*see pg. 2*) to the Council at <u>sbcc@des.wa.gov</u>

A separate application is required for each advertised TAG vacancy.

Applications are not maintained for future consideration once to recruitment period is ended.

# **CONSIDERATION**

The Council will consider applications and make selections based on qualifications applicable to the specific TAG vacancy. All decisions by the Council regarding appointments to TAGs are final and are not subject to appeal unless such appeal is brought by a motion from a Council member.

> www.sbcc.wa.gov sbcc@des.wa.gov

## APPLICATION REQUIREMENTS

- COMPLETED
  APPLICATION
  FORM
- **RESUME**

## Additional Optional Documents

- Letters of Support or recommendation
- Materials demonstrating expertise and knowledge applicable to a specific TAG Vacancy
- Approval/Support Letter if Representing a stakeholder group



STATE OF WASHINGTON

#### STATE BUILDING CODE COUNCIL

1500 Jefferson Street SE • P.O. Box 41449 • Olympia, Washington 98504 (360) 407-9277 • fax (360) 586-9088 • e-mail sbcc@des.wa.gov • www.sbcc.wa.gov

#### Application for appointment to a SBCC Technical Advisory Group (TAG)

| First Name                               | Last Name   |                         | Phone Number          |
|--|---|-------------------------|-----------------------|
| Mailing Address                          |   | City                    | Zip Code              |
| Email Address                            |   |                         |                       |
| TAG you wish to jo                       | oin   |                         |                       |
| • •                                      | sly served on a TAG, if so<br>When                  |                         |                       |
| If you previously s<br>documents for the | erved on a TAG, you mu<br>new term.                 | st submit a new applica | tion and supporting   |
|  | etailing your knowledge<br>recommendation, if so de | •                       | TAG you wish to join. |
| Signature:                               |   | Date                    | ·                     |
| The completed ap                         | plication, resume, and le                           | tter(s) of recommendati | on may be submitted.  |
| Mailed to: P.O.                          | Box 41449   | Emailed to: sbcc@       | <u>)des.wa.gov</u>    |

Olympia, WA 98504