|  |  |  |
| --- | --- | --- |
| **Committee Member Information Sheet** | | |
| **Date** | |  |
|  | | |
| **Committee** | |  |
| **Primary/Alternate/Ad Hoc** | |  |
| **Other Concurrent Service** | |  |
| **Other Concurrent Service** | |  |
|  | |  |
| **Initial Appointment:** | |  |
| **Beginning Date** | |  |
| **End Date** | |  |
|  | |  |
| **Reappointment:** | |  |
| **Beginning Date** | |  |
| **End Date** | |  |
|  | |  |
| **Reappointment:** | |  |
| **Beginning Date** | |  |
| **End Date** | |  |
|  | |  |
| **End of Service Date** | |  |
|  | | |
| **Prefix (e.g., Dr, Mr, Ms)** | |  |
| **First Name** | |  |
| **Last Name** | |  |
| **Academic Degree(s)** | |  |
| **Title** | |  |
|  | |  |
| **Specialty / Representation** | |  |
| **OSU Affiliation** | |  |
|  | |  |
| **Department/College/Unit/Business** | |  |
| **Building and Room Number** | |  |
| **Street Address** | |  |
| **City, State, Zip** | |  |
|  | |  |
| **Email** | |  |
| **Phone (office)** | |  |
| **Phone (cell)** | |  |
| **Phone (other – specify)** | |  |
| **Pager** | |  |
|  | |  |
| **Assistant’s Name** | |  |
| **Assistant’s Email** | |  |
| **Assistant’s Phone** | |  |
| **Member-Related Correspondence (Appointment & Recognition Letters)** | | |
| ***Please list below the individual(s) who should receive a copy of your appointment and recognition letters.*** | | |
|  | | |
| **Name** |  | |
| **Email** |  | |
|  | | |
| **Name** |  | |
| **Email** |  | |
|  | | |
| **Name** |  | |
| **Email** |  | |
|  | | |
| **Name** |  | |
| **Email** |  | |
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| **Name** |  | |
| **Email** |  | |
|  | | |
| **Name** |  | |
| **Email** |  | |
|  | | |