



BLACK COMMISSIONED OFFICERS ADVISORY GROUP (BCOAG)



BCOAG Voting Membership Curriculum Vitae Summary Sheet

Instructions: *This form must accompany the **BCOAG Voting Membership Self-Nomination** packet. This form must not be modified and responses to the questions below must not exceed two pages. All documents submitted for voting membership nomination must be submitted in one combined Adobe file to atpowell@bop.gov. Note: Nominees must utilize this form for consideration. Do not submit your category CV or CV summary sheet in your nomination packet.*

Rank: _____ Name: _____

PHS Serial Number: _____ Category: _____

Notable Career Accomplishments: Please include 3-5 most notable career accomplishments. Entries should be bulleted. Describe your accomplishment and its impact, including the scope of each.

BCOAG Activities: List your most recent BCOAG activities and your role (i.e., Volunteer, Chair, etc.) in descending chronological order.

<u>Committee</u>	<u>Activity/Event Name</u>	<u>Role</u>	<u>Year</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Other PHS Activities: List your top three PHS-related (non-BCOAG) activities and your role (i.e., Volunteer, Chair, etc.).

<u>Organization</u>	<u>Activity</u>	<u>Role</u>	<u>Year</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____



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Non-PHS Activities: List your top three non-PHS, professional, or other outside organization activities and your role (i.e., Volunteer, Chair, etc.).

<u>Organization</u>	<u>Activity</u>	<u>Role</u>	<u>Year</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Agency and Civic Awards: List your three highest civic, professional organization, agency, division, etc. awards/honors. **Please do not include PHS Awards as these are included in your PIR.**

<u>Award Type/Title</u>	<u>Awarding Body</u>	<u>Award Citation</u>	<u>Year</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Education and Training: List your three highest degrees, certificates, or credentials (Examples: MS, Lean Six Sigma, CPH, CEPH, etc.)

<u>Degree/Certificate</u>	<u>Institution</u>	<u>City, State of Institution</u>	<u>Year</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Deployments: List your three most recent deployments. Please indicate team memberships (i.e., Tier III, RDF, NIST, SAT, Agency Mission Critical), role (i.e., logistics member, planning team lead, clinical role, etc.), city and state of deployment and year.

<u>Name/Mission</u>	<u>Deployment Team & Role</u>	<u>City State</u>	<u>Year</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____