



ILLINOIS FEDERATION OF BUSINESS WOMEN'S CLUBS, INC. (IFBW)

Professional Leadership Development (PLD) Speak-Off

BIOGRAPHICAL INFORMATION

This biographical information will be used as part of the judging process for all Young Professional and Career Professional Candidates. You may attach additional sheets as necessary. The total number of pages for the biographical information may not exceed six (6). All materials for the Speak-Off **must be e-mailed by May 1** to the IFBW Education Chair.

Please indicate which category you will be participating in:

Young Professional

*(between the ages of 18 [by 10/31/21] and
35 [by 3/31/21], inclusive)*

Career Professional

(at least 36 years old or older by 3/31/21)

1. PERSONAL DATA

Name: _____

Address: _____

City/State/Zip: _____

Phone: (Home) (_____) _____ (Cell) (_____) _____

Email Address: _____

Name of sponsoring Local IFBW Organization (if applicable): _____

2. EMPLOYMENT

Present Position: *(If not presently employed, please describe other activities)*

Employer: _____

Address: _____

Job Title: _____

Job Duties:

3. EDUCATION

Degree(s): Certificate Associate Bachelor Graduate Doctorate Other _____

Major Field of Study: _____

School Name: _____

Other Education or Training: _____

4. AWARDS/HONORS

5. PRESENTATIONS, PUBLICATIONS, PAPERS PRESENTED, SPEECHES GIVEN

6. COMMUNITY INVOLVEMENT

7. MEMBERSHIPS

8. **CAREER GOAL:** Where do you see yourself 5-10 years from now? (150 words or less)

9. **WEBSITE PERMISSION**

As a participant in and potential winner of the YP/CP state competition, you have my permission to use my name, photo, and other details of my participation on the organization's website.

Check for "yes" or "no" and please "initial:" Yes No _____ (initial)

10. **STATE LEGISLATIVE PLATFORM STATEMENT**

I, _____, have reviewed the IFBW Legislative Platform and pledge I will not speak against platform items as a representative of IFBW, if I am selected as a winner of the state competition.

I, _____, do hereby confirm that the Professional Leadership Development (PLD) Biographical information is true and correct to the best of my knowledge.

Signature: _____ Date: _____

If under 18 as of March 31, 2021, please include Parent/Guardian Signature below:

Parent/Guardian: _____ Date: _____