

## YOUNG PROFESSIONAL PROGRAM NOMINATION

Indiana/Kentucky Chapter

Due: November 30, 2016

Personal Information	
NAME:	COMPANY:
ADDRESS:	
PHONE:	EMAIL:
DATE OF BIRTH*	
*all young professionals must	t be under 40 years of age to participate
Professional Information	
POSITION/TITLE:	
YEARS IN INDUSTRY	(select one)
0-5 years	$\Box$ 5-10 years $\Box$ 10+ years
Additional Information	
Please attach the following documents:	
1. Resume	
	mendation from company/employer endorsing candidate rom the candidate explaining interest in the program
Please turn in application	
Trease turn in application	Associated Builders and Contractors of Indiana/Kentucky
	1810 Taylor Avenue
	Louisville, KY 40213
	Email: fran@abcindianakentucky.org