

## WIOA Local Workforce Development Board Membership

<b>Business Representatives (per WIOA section 107(b)(2)(A))</b>				
No.	Name	Affiliation and Title	Contact Phone and Email	Address
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				

**LWDA Workforce Representatives (per Section 107(b)(2)(B))**

No.	Name	Affiliation and Title	Contact Phone and Email	Address
1				
2				
3				
4				
5				
6				
7				
8				

**Education & Training Representatives (per Section 107(b)(2)(C))**

No.	Name	Affiliation and Title	Contact Phone and Email	Address
1				
2				
3				
4				
5				

**Governmental, Economic, and Community Development Representatives (per Section 107(b)(2)(D))**

No.	Name	Affiliation and Title	Contact Phone and Email	Address
1				
2				
3				
4				

5				
6				

<b>Other Representatives (per Section 107(b)(2)(E))</b>				
No.	Name	Affiliation and Title	Contact Phone and Email	Address
1				
2				
3				

Denote multiple representations with an asterisk (\*).

	<b>Number</b>	<b>Percentage</b>
<i>Total Seats:</i>		
<i>Total Seats Filled:</i>		
<i>Total Seats Vacant:</i>		
<i>Seats Filled Representing Business:</i>		
<i>Seats Filled Representing the LWDA Workforce (must be at least 20%):</i>		
<i>Seats Filled Representing Education &amp; Training:</i>		
<i>Seats Filled Representing Government, Economic &amp; Community Development Entities:</i>		
<i>Seats Filled Representing Other Entities (as determined appropriate by CEOs):</i>		