**Date:**

**Your Name:**

**Your Title:**

**Organization:**

**Your Email:**

**Your Phone or Cell Number:**

**Name of DNP Users Group member you are nominating:**

**For which role is the nomination:**
Director – with executive position as VP of Technology
Director – with executive position as VP of Marketing

**Email address or phone/cell number for the member you are nominating**:

1. **Briefly describe why you believe the nominee is a good candidate to serve on the DNP Users Group Board of Directors:**
2. **Briefly describe the nominee’s experience with the DNP3 protocol or any other standards development efforts in which the nominee has been involved:**