Internal Revenue Service Advisory Council Membership Application

Please complete this application and return it to the address below no later than *Close of Business* on **June 17, 2011**. You may also fax your application to: 202-927-4123.

Internal Revenue Service National Public Liaison - IRSAC CL:NPL — Room 7559-IR 1111 Constitution Avenue, N.W. Washington, DC 20224

PART I – Applicant Information (Some of	the information request	ed in Part I is requi	red to perform an FBI	background check)	
Name	Maiden name or othe	Maiden name or other name(s) used Date(s) names were used		ere used	
Home street address				Home telephone number	
City		State		ZIP Code	
Date of birth (mm-dd-yyyy)	City of birth		State of birth	<u>I</u>	
Business name					
Business address			Job title	Job title	
City		State		ZIP Code	
Business telephone number	Business FAX number	er	E-mail address		
PART II – Applicant must complete and s	 submit Form 13775, Ta	x Check Waiver, v	 vith this form		
PART III - Desired Skills and Qualification	ns (Federally-registered	d lobbyists cannot b	ne members of the IRS	SAC)	
Please submit a brief statement addressing represent and how such dealings will allow submit a short (one or two page) statement to the following:	you to know the view's	or position of that pa	articular organization of	or group. In addition, please	
 Applying tax law knowledge in the resolut Experience developing and implementing Experience in business management and Experience working in a multi-cultural/mu Experience establishing successful strate 	customer service initiat improvement. Iti-lingual environment. gic partnerships.	ives and tools.			
• Ability to examine issues from a "macro"	viewpoint, and effectivel	y communicate you	ır views and recomme	endations regarding issues.	
PART IV – Applicant Resume	· · - · ·	100 1	0	()	
Please attach a copy of your resume, include employment. Additionally, list professional of applicable.					
PART V - Other IRS Councils/Committee	es .				
Have you ever been a member of the Interr Art Advisory Panel, Electronic Tax Administ Program Advisory Committee? If so, please	ration Advisory Commit	tee, Tax Exempt Ad	dvisory Committee or I	Information Reporting	
Councils/Committee name			Dates of	Membership	

PART VI – Applicant Acknowledgement				
I certify that to the best of my knowledge and belief, all of my statements are true, correct, complete, and made in good faith.				
Applicant signature	Date signed			

PRIVACY ACT STATEMENT

The Privacy Act of 1974 requires that when we ask you for information about yourself, we state our legal right to do so, tell you why we are asking for it, and how it will be used. We must also tell you what could happen if we do not receive it, and whether your response is voluntary, required to obtain a benefit, or mandatory. Our legal right to ask for the information is Public Law 92-463 and Executive Order (E.O.) 9397. We are asking for the information in order to perform Federal income tax, FBI, and practitioner checks as required of all members and applicants to the IRS Advisory Council.

Supplying the information is voluntary and not directly required by law, but facilitates the processing of your application for membership in the IRS Advisory Council. Requesting your social security number, which is solicited under authority of E.O. 9397, is also voluntary and no right, benefit, or privilege provided by law will be denied as a result of refusal to disclose it. However, not providing all or any part of the information may limit consideration of your application.