# National Marine Sanctuary Advisory Council

# Application Form

Before applying for sanctuary advisory council membership, please review:

(1) the sanctuary advisory council charter provided in your application kit, and;

(2) the Office of National Marine Sanctuaries (ONMS) Sanctuary Advisory Council Implementation Handbook available online at http://www.sanctuaries.noaa.gov/management/ac/acref.html (or you may obtain a copy from your local sanctuary – see contact information below).

The charter outlines the purposes and governs the operation of the sanctuary advisory council. The handbook provides broader operational requirements for sanctuary advisory councils. In applying for sanctuary advisory council membership, you are agreeing to abide by the terms of the charter and the handbook if you are selected as a council member or alternate.

As a part of the selection process, please note the Office of National Marine Sanctuaries will conduct a LEXIS/NEXIS check and a departmental bureau check for potential conflict of interest and other issues in your background.

Additionally, as per guidance from the White House Office of Management and Budget on May 7, 2009, the Office of National Marine Sanctuaries will conduct a database search (via the Senate's Lobbying Disclosure Act Database) to determine if you have been a federally registered lobbyist. Individuals, who have been a federally registered lobbyist in the two year period before the proposed appointment date for the advertised council seat(s), may not be selected as an advisory council member or alternate.

Additional information and guidance regarding the use of the information you submit on this form and its availability under federal law can be found at the end of this form. Please review this information.

Sanctuary advisory council members and alternates must be 18 years of age or older, with the exception of individuals filling youth seats.

Please note that federal government employees are not allowed to sit on sanctuary advisory councils in a personal capacity. State employees and members of a state legislature are allowed to apply to sit on sanctuary advisory councils in a personal capacity. State agency employees must provide a letter of support on official agency letterhead from their state supervisor at the time they submit their applications. Members of state legislatures are not required to provide such letters of support.

Please indicate which advertised seat(s) you are applying for (descriptions of each seat provided in the attached cover letter), provide your contact information, and respond to the questions below. The Office of National Marine Sanctuaries may consider applicants for seats and positions for which they have not applied if the Office of National Marine Sanctuaries believes they are qualified for that seat and are willing to serve in it.

**The application deadline is November 30, 2015. Please return all pages of your completed sanctuary advisory council application form, and any attached statements or documents, to Denise Shiraki at:**

**NOAA/DKIRC**
**ATTN: NOS/HIHWNMS/Denise Shiraki**
**1845 Wasp Blvd., Bldg 176**
**Honolulu, HI 96818**

**Or email to: denise.shiraki@noaa.gov**

**Date**: _____

**First Name***:_____ **Middle**_____**Last** _____

* Please include full first, middle and last names.

**Position(s)/Seat(s) applying for (check all that apply)**:

| | |
|---|---|
| | Hawai‘i County (primary) |
| | Hawai‘i County (alternate) |
| | Lāna‘i Island (alternate) |
| | Citizen-at-large (alternate) |
| | Education (alternate) |
| | Tourism (alternate) |
| | Whale Watching (primary) |
| | Whale Watching (alternate) |
| | Fishing (primary) |
| | Fishing (alternate) |
| | Research (primary) |
| | Honolulu County (primary) |
| | Kaua‘i County (primary) |
| | Kaua‘i County (alternate) |
| | Maui County (primary) |
| | Maui County (alternate) |
| | Moloka‘i Island (alternate) |

**Home Address**

Address 1: _____

Address 2: _____

City:_____ State: _____ Zip Code: _____

Home Phone:_____ Cell Phone: _____

Home Fax: _____ Home E-mail: _____

**Work Address**

Company/Organization: _____

Position/Job Title: _____

Address 1: _____

Address 2: _____

City:_____ State: _____ Zip Code: _____

Work Phone:_____ Work Cell: _____

Work Fax: _____ Work E-mail: _____

**Please thoroughly address each of the following in an attached statement, by number, in the same order as below:**

1. Why are you interested in serving on the sanctuary advisory council?
2. Explain your views regarding the protection and management of marine or Great Lake resources, including natural (fish, coral reefs, etc.), historic or cultural resources.
3. Describe your particular expertise and experience as it relates to the goals and uses of the sanctuary and, in particular, the seat(s) for which you are applying. Be sure to include qualifications that you have or other information that you think would be relevant and beneficial to the sanctuary advisory council.
4. Describe what you think is the role of the council, and how you will work to best support the sanctuary as a sanctuary advisory council member or alternate.
5. Describe your formal community and professional affiliations and employment.
6. Explain how you will coordinate with, consult with, and inform the members of the constituency you will represent, if appointed.
7. How much time do you have and are you willing to give to participate in sanctuary advisory council activities (e.g., meetings, constituent outreach, retreats, chairing or participating on a subcommittee or working group, and reviewing written materials)?
8. How long have you lived in the community or area affected by the sanctuary? Please address whether you are a year-round or seasonal resident of the area.
9. Have you attended previous sanctuary advisory council meetings or sanctuary advisory council working group meetings? If so, please describe your past attendance and participation.

Information obtained through this application process will be used to determine the qualifications of the applicant for membership on the sanctuary advisory council. The Office of National Marine Sanctuaries intends affirmatively to disclose the applications only to DOC/NOAA staff and other members of the applicant review panel. However, the Office of National Marine Sanctuaries may be required to disclose the applications in response to a court order, a congressional request, or a request from the public under the Freedom of Information Act (FOIA).

If disclosure is requested under the FOIA, the Office of National Marine Sanctuaries will endeavor to protect the privacy of applicants by withholding personal information, such as home addresses and telephone numbers. In contrast, statements of philosophy or opinions contained in the application would likely be released. Applying for membership on the sanctuary advisory council is voluntary.

Public reporting burden for this collection of information is estimated to average one hour per response, including the time for reviewing instructions, searching existing data sources, gathering the data needed, and completing and reviewing the collection of information. Send comments regarding

this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Office of National Marine Sanctuaries, 1305 East West Highway, N/NMS, Silver Spring, Maryland 20910.

Notwithstanding any other provision of law, no person is required to respond to, nor shall any person be subject to a penalty for failure to comply with, a collection of information subject to the requirements of the Paperwork Reduction Act, unless that collection of information displays a currently valid OMB Control Number.

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07/31/2015