

Election to the Board of Directors and Council of Regions 2020

**CURRICULEM VITAE**

Please enter your information, then print out, sign a copy and sent it to us with your proposal form and photograph.
Please use additional sheets if required.

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| Full name: |  |
| Name and address of company or firm of which the candidate is the authorised representative: |
|  |
| Tel: |  | Mobile\*: |  | Email: |  |
| Position held in company:  |  |
| Residential address\*: |  |
| Residential tel\*: |  | DOB\*: |  |

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| Election statement (maximum 200 words): |
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| Travel industry experience and ABTA involvement: | Period (e.g. 2000 – 2004) |
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| Experience outside the travel industry: | Period (e.g. 2000 – 2004) |
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| Signature: |  | Date: |  |

\*for secretariat use only