Digital Identity (DID) Subcommittee Technical Advisor Application Form

AAMVA’s Digital Identity (DID) Subcommittee is seeking associate member subject matter experts in Digital Identity Credential development, implementation, issuance and verification to serve as technical advisors to the group. Advisors will serve on the subcommittee for a two-year term.

Advisors will be called upon on an as needed basis to support the group by providing expert advice and feedback on updates to the AAMVA mDL Implementation Guidelines and other AAMVA products related to digital identity credentials

Please be advised that a limited number of applicants will be selected. Applicant selection will be based on skill set, familiarity, knowledge level, and interest; only qualified applicants will be considered. Interested parties must complete and submit this form.

**APPLICANT INFORMATION**

|  |  |  |
| --- | --- | --- |
| Name | Click here to enter text. | |
| Title or Rank | Click here to enter text. | |
| Agency or Organization | Click here to enter text. | |
| Street Address | Click here to enter text. | |
| City, Jurisdiction, Postal Code | Click here to enter text. | |
| Work Phone Click here to enter text. | | Email Address Click here to enter text. |

**APPLICANT QUALIFICATIONS**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Describe your experience (including number of years) working with digital identity credentials | Click here to enter text. | | | | |
| ***Please select one for each question below:*** | None | Fair | Average | Good | Advanced |
| Please rate your familiarity and understanding of AAMVA’s mDL Implementation Guidelines |  |  |  |  |  |
| Please rate your familiarity and understanding of AAMVA’s Digital Trust Service |  |  |  |  |  |
| Please rate your level of knowledge on digital identity credential authentication |  |  |  |  |  |
| Please rate your level of knowledge on digital identity provisioning |  |  |  |  |  |
| Please rate your level of knowledge on Identity Fraud and Counterfeiting |  |  |  |  |  |

**APPLICANT INTEREST**

**What interests you most about serving as an advisor to the subcommittee? Provide a brief response below or attach a separate file:**

Click here to enter text.

**APPLICANT CONTRIBUTION**

**Please explain the value and contributions you feel you can offer to the subcommittee. Provide a brief response below or attach a separate file:**

Click here to enter text.

**APPLICANT RESUME**

**Please provide a brief summary of your relevant expertise below (or attach a separate file):**

Click here to enter text.

**APPLICANT EXPECTATIONS**

Applicants should ensure (to the best of their knowledge) that they have the availability and commitment to serve the subcommittee. Applicants must be willing and able to commit sufficient time both in and outside of scheduled meetings as requested by the subcommittee; this may include both in person and virtual meetings. Advisors will be selected and assigned at the individual level, not the company level; in the event the assigned advisor is unavailable or cannot serve, substitutions and replacements will not be permitted.

Advisors are required to make a good faith effort to actively participate. Active participation includes but is not limited to attending meetings, providing feedback/expertise as requested, and engaging in group discussions (offering knowledge, opinions, experience, and challenges). Advisors may be given writing, research, and outreach assignments as appropriate. It is expected that advisors who volunteer for this group will complete assignments in the amount of time agreed upon.

Technical Advisors must ensure that they are not representing their own interests and needs, but rather those of AAMVA’s jurisdictional members and the digital identity ecosystem as a whole.

**AGREEMENT AND SIGNATURE**

As applicant, I affirm that I meet the qualifications and am willing to serve if selected.

|  |  |  |
| --- | --- | --- |
| Applicant Name (printed) | Click here to enter text. | |
| Applicant Signature | Click here to enter text. | Date: Click here to enter text. |

**APPROVAL**

It is advised that you discuss your interest, and the participation requirements (stated above) with your leadership (as appropriate) prior to the submission of your application to ensure expectations are understood and you are afforded the support needed from your employer. **INCOMPLETE APPLICATIONS NOT BE ACCEPTED.**

**Please return the application to Member Services at** [**committees@aamva.org**](mailto:committees@aamva.org) **no later than Friday, October 10,2025.**

**If you have any questions about the subcommittee, or this opportunity, please contact:**

**Ryan Willams (rbwilliams**[**@aamva.org**](mailto:mstephens@aamva.org)**) or Tim Roufa (troufa@aamva.org)**