## **Local Network Candidate Application**

Name:	
Designations:	
Firm:	
Address:	
Cell Phone: Email:	<del></del>
Current Position, if any, at Women's Council of REALTORS®:	<del></del>
Applying for elected positions: President-elect: *Treasurer:	
Interested in appointed positions: *Membership Director: Program Director: Secret	ary:
Other appointment(s) of interest:	
(*National Affiliate Members eligible for Treasurer and Membership Director)	
Answer Yes or No to following questions. Circle or underline your answer.	
Yes / No Are you a REALTOR® or REALTOR®-Associate in good standing with a local REALTORS®?	Board/Association of
o Attach documentation of membership in good standing from Board/Association.	
Yes / No Are you a National Affiliate Member in good standing with a local Board/Associ REALTORS®?	ation of
<ul> <li>Attach documentation of membership in good standing from Board/Association.</li> </ul>	
<ul> <li>Yes / No I Commit to attend Board meetings, appropriate Project Team and Women's Cour Programs.</li> </ul>	ncil Events and
<ul> <li>Yes / No I have read the job description for this position and am qualified to be a candidate</li> </ul>	
Signature: Date:	

MUST be returned to Candidate Review Team Chair no later than 30 days prior to election date.

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