

# President-Elect Candidate Application

PLEASE TYPE OR PRINT; COMPLETE ALL APPLICABLE SPACES.

## CONTACT INFO

Name: \_\_\_\_\_

Real Estate License Number: \_\_\_\_\_ NRDS: \_\_\_\_\_

Primary Board Affiliation: \_\_\_\_\_

Firm/Branch: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone (if different from Cell): \_\_\_\_\_

## PROFESSIONAL INFO

Position with Firm: \_\_\_\_\_ Number of Years in Profession: \_\_\_\_\_

Areas of specialization:

Residential Sales     Commercial Sales     Appraisal     Farm and Land     Property Management

Commercial Leasing     Other (Specify: \_\_\_\_\_)

Local, State and National REALTOR® Association experience: (Committee Member, Committee Chairman, Director, etc.)

Local Association: \_\_\_\_\_

State Association: \_\_\_\_\_

National Association: \_\_\_\_\_

Other Leadership Positions (include name of organization, position and number of years held): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Community Involvement: \_\_\_\_\_

NAR Professional Designations attained (check all that apply)  GRI  CRS  CRB  ABR  ABRM  CCIM   
CRB  CRS  CRE  e-PRO  Other (Specify: \_\_\_\_\_)

Military Service?  Yes  No If yes, Number of Years: \_\_\_\_\_

## THE ASSOCIATION

What do you see as the primary function of this Association? \_\_\_\_\_

In your opinion, what are the three most important goals this Association needs to pursue over the next three years?

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

The office of President-Elect is a three year commitment that requires your attendance at SVAR BOD and committee meetings, CVRMLS BOD and committee meetings; VAR and NAR legislative, mid-year and annual conferences and SVAR social events and membership meetings. Will you be able to devote the time necessary to attend these meetings and carry out the duties and responsibilities required as President-Elect of SVAR?  Yes  No

By my signature below I certify I am a member in good standing of the Southside Virginia Association of REALTORS®; acknowledge that I have read the job description of the position I have applied for and agree to fulfill the specified duties and responsibilities to the best of my ability if elected.

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Date Received by SVAR: \_\_\_\_/\_\_\_\_/\_\_\_\_ Processed by: \_\_\_\_\_

## REQUIRED ATTACHMENTS

1. Photo (professional headshot) must be attached (digital format preferred).
2. An essay of no more than 250 words on "Why I Wish to Serve on the Board."
3. Signed SVAR Leadership Contract.

**Deadline for submission: September 1, 2017, no later than 5:00 pm.**

Send completed form and all required attachments to the Leadership Development Advocacy Committee (LDAC) at the address below, or email to [info@SVAREaltors.com](mailto:info@SVAREaltors.com).