



2011 Application for Officer Nomination
Illinois State Chapter
Women's Council of REALTORS®
Deadline for Nominations is May 21, 2010

INFORMATION ABOUT YOU:

Name: _____

Company Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Fax Number: _____

E-mail Address: _____

Position Held with Firm: _____ Number of Agents in Firm: _____

Local Chapter Name (OR Indicate if a Member at Large): _____

Number of Years as WCR Member: _____ Number of Years a Licensee: _____

Local Board or Association: _____

Is Real Estate your Full-Time Occupation? _____ If NO, Please Explain: _____

Approximate Number of Hours Per Week Devoted to Real Estate: _____

WCR PARTICIPATION:

Please Check All That You Have Attended:	<u>2006</u>	<u>2007</u>	<u>2008</u>	<u>2009</u>
National Mid Year Meeting (May)	_____	_____	_____	_____
National Convention (November)	_____	_____	_____	_____
Regional Conferences	_____	_____	_____	_____
Illinois State Chapter Membership Meetings	_____	_____	_____	_____

Do you have any known health concerns that could limit your ability to serve? Yes _____ No _____

Are you aware that the state chapter funds allocated to you, if elected, will not cover your actual expenses needed for travel? Yes _____ No _____

Are you financially prepared to accept this responsibility? Yes _____ No _____

EDUCATION:

Please Check All That Apply:

High School Graduate _____

Business or Community College _____ Subject Area _____

College # of Years _____ Associate Degree _____ Degree _____

Post Graduate _____

Specialization _____

REALTOR Designations Earned and Currently Maintained:

ABR ___ ABRM ___ CCIM ___ CIPS ___ CCPM ___ CRE ___ CRB ___ CRS ___ CRBM ___

GRI ___ LTG ___ PMN ___ SIOR ___ SRES ___ OTHER _____

Working Toward: _____

Other Education: _____

Certifications Earned: ePRO® _____ OTHER _____

Other Education: _____

WCR NATIONAL LEADERSHIP AND PARTICIPATION:

Chairman of a National Committee or Work Group:

Committee: _____ Year: _____

Committee: _____ Year: _____

Vice-Chairman of a National Committee or Work Group:

Committee: _____ Year: _____

Committee: _____ Year: _____

National Workshop Moderator: _____ Year: _____

National Committee Member:

Committee: _____ Year: _____

Committee: _____ Year: _____

Committee: _____ Year: _____

Attended WCR Leadership Academy? ___ No ___ Yes (If Yes, What Year: _____)

WCR STATE LEADERSHIP AND PARTICIPATION:

POSITION	YEAR
Governor	_____
Treasurer	_____
Secretary	_____

Chairman of a State Committee:

Committee: _____ Year: _____

Committee: _____ Year: _____

Committee: _____ Year: _____

Vice-Chairman of a State Committee:

Committee: _____ Year: _____

Committee: _____ Year: _____

Committee: _____ Year: _____

State Committee Member:

Committee: _____ Year: _____

Committee: _____ Year: _____

Committee: _____ Year: _____

Other Significant State Positions: _____

Your Most Significant Contribution to the State Chapter and Why: _____

WCR LOCAL CHAPTER LEADERSHIP AND PARTICIPATION:

POSITION	YEAR
Treasurer	_____
Secretary	_____
Vice-President of Membership	_____
President-Elect	_____
Local Chapter President	_____

Your Most Significant Contribution to the Local Chapter and Why: _____

LOCAL REALTOR ASSOCIATION-IAR-NAR LEADERSHIP AND PARTICIPATION:

(Please Check All That Apply)

Director: Local Year(s) _____
State Year(s) _____
National Year(s) _____

Local Officer: Treasurer Year(s) _____
Secretary Year(s) _____
Vice-President Year(s) _____
President-Elect Year(s) _____
President Year(s) _____

Significant Local Association Committees/Positions/Accomplishments: _____

Significant State Association Committees/Positions/Accomplishments: _____

Significant NAR Committees/Positions/Accomplishments: _____

AWARDS, HONORS AND ACHIEVEMENTS:

Local: _____

State: _____

National: _____

OTHER ACCOMPLISHMENTS:

Briefly describe important accomplishments/participation with any other civic, trade or professional organizations:

ON A SEPARATE SHEET OF PAPER, PLEASE SUBMIT A BRIEF PARAGRAPH ON EACH OF THE FOLLOWING:

1. Where do you see the Illinois State Chapter in one year/in five years? If you could institute one change, what would it be?
2. How will your special skills and talents benefit the Illinois State Chapter of WCR?
3. What motivates you to serve in the recommended position?

Please forward your completed Application to the Nominating Committee Chair:

Joyce Niehaus
6895 N. Friday Road
Byron, IL 61010

DEADLINE FOR NOMINATIONS IS FRIDAY, MAY 21, 2010

Interviews will be scheduled for Friday, May 28, 2010 or sooner. You will be advised via email of the time and location of the in-person interview.

You may contact **Joyce Niehaus**, Nominating Chair, if you have any questions regarding this Application:
815-985-3555Cell
Haus2@msn.com

I have read, understand and signed the Agreement to Serve Form on the last page of this Application.

Date of Application: _____

Application Completed by: _____

Print Name of Applicant: _____

Signature of Applicant: _____



Agreement to Serve as Officer

Illinois State Chapter Women’s Council of REALTORS®

I, the undersigned, acknowledge that I have been recommended or nominated to hold office in the Illinois State Chapter of the Women’s Council of REALTORS®. I am willing to serve as an officer, if elected.

I fully understand that the office requires that I keep myself informed of the issues facing the Illinois State Chapter, Illinois Association of REALTORS®, National Association of REALTORS®, and the Women’s Council of REALTORS®. I agree to seek the opinions of Realtors® in the Council and throughout the nation regarding these issues. I pledge to represent the consensus of these opinions to the best of my ability in my voting and public positions.

Further, I understand that I have the responsibility to uphold and support decisions made by the National Women’s Council of REALTORS®, the Illinois State Chapter WCR, the Illinois Association of REALTORS®, and the National Association of REALTORS® through the express will of the majority.

I further agree that my signature below constitutes my resignation if I fail to attend the required Illinois State Chapter meetings of the Women’s Council of REALTORS®, as well as all National meetings of the Women’s Council of REALTORS® during the term of my office. My obligation is to attend scheduled State and National meetings, Illinois State Chapter Executive Committee and Governing Board meetings, as well as the Executive Officer’s Retreat.

I have been informed and understand that reimbursement for my travel to and from the required meetings will be partially reimbursed by the Illinois State WCR Chapter as set forth in the annual budget of the Chapter. I further understand that reimbursement will be based upon full participation at the meetings for which I seek reimbursement.

Print Name: _____

Signature: _____ Date: _____

Candidate for Officer of the Illinois State Chapter of Women’s Council of REALTORS®:

_____ President _____ President-Elect _____ Treasurer _____ Secretary _____ Governor

This form must be completed and signed by all prospective State Officers each year.