

METRO SOUTH ASSOCIATION OF REALTORS®

APPLICATION FOR ELECTED OFFICERS

**Deadline Monday, July 9, 2018**

**(APPLICATIONS RECEIVED AFTER 5:00 P.M. ON 7-9-2018 WILL BE RETURNED)**

YEAR 2019

DATE \_\_\_\_\_

Candidate for the Office of:

_____ President Elect	1-year term
_____ Vice President of Governance	1-year term
_____ Vice President of Member Services	1-year term
_____ Vice President of Governmental Affairs	1-year term
_____ Vice President of Professional Development	1-year term
_____ Treasurer	1-year term
_____ Local Director	3-year term
_____ State Director	2-year term

**Please be sure that you have filled in each area completely.**

**If more space is needed, attach additional sheet.**

- *Please refrain from contacting members of the Nominating Committee for the specific purpose of seeking their endorsement of your nomination.*
  - *Please refrain from bringing gifts and/or food to the Nominating Committee.*
  - *Please refrain from bringing individuals to speak on your behalf to the interview.*

Name of Candidate: \_\_\_\_\_

Firm Name: \_\_\_\_\_ Current Position \_\_\_\_\_

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

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

Business Phone: \_\_\_\_\_ Fax \_\_\_\_\_

Phone Number where you can be reached following the completion of the Nominating

Committee meeting: \_\_\_\_\_

*Have you ever been convicted of, pled nolo contendere to, or been granted first offender treatment upon being charged with (1) any criminal offense other than a traffic violation; or (2) any traffic violation that involved driving under the influence, homicide or feticide by vehicle, fleeing the scene of an accident, attempting to elude a police officer, or impersonating a law enforcement officer? No \_\_\_\_\_ Yes \_\_\_\_\_ If yes, please attach an explanation.*

*Have you ever been disciplined by the Georgia Real Estate Commission or any other state or federal licensing agency or authority which regulates any profession? (Disciplinary actions include, but are not limited to, such actions as: a reprimand, a suspension, a revocation, a fine, or any restriction placed on a license.) No \_\_\_\_\_ Yes \_\_\_\_\_ If yes, please attach an explanation.*

*Do you have, or have you had any financial difficulties that would be a source of embarrassment to MSAR if made public?*

*Have you or any company in which you have an ownership interest had any financial issues that you feel the Nominating Committee needs to be made aware of? No \_\_\_\_\_ Yes \_\_\_\_\_ If yes, please attach an explanation.*

*Have you had property foreclosed upon or given title or deed in lieu thereof?*

**PERSONAL HISTORY / EDUCATIONAL BACKGROUND**

**BUSINESS HISTORY**

*(Give primary areas, i.e., commercial brokerage: number of business offices; total number of associates, independent contractors, employees, etc.; and give designations held.)*

**CIVIC ACTIVITIES**      *(Briefly describe and give specific dates)*

**REALTOR® RELATED ACTIVITIES**      *(List major committees, offices and give specific dates)*

**Local Board/Association:**

**State Association:**

**National Association:**

**Additional Pertinent Information:**

**CONFLICT OF INTEREST DISCLOSURE**

As a volunteer of the Metro South Association of REALTORS®, I recognize that I owe duties of care and loyalty to the association. One aspect of fulfilling those duties is to avoid conflicts of interest in which my allegiance might be split between an association position or responsibility and some other professional, business, or volunteer position or responsibility. To help avoid conflicts, on this form I am disclosing other situations or areas in which it might even appear that I have conflicting duties to other entities. I invite any further review by the association of any aspects of these situations or areas that might be considered appropriate. Also, I will take other steps, such as avoiding deliberation and resolution of certain issues or even withdrawing from my position in the association, if it is determined that those steps are necessary to protect against legal liability to the association or to me arising from conflicts of interest.

- 1. Professional, business or volunteer positions or responsibilities that might give rise to conflicts:

---

---

---

---

---

- 2. Situations in which I am serving as a vendor, or am employed by or consulting with a vendor, to the association or its members:

---

---

---

---

---

- 3. I know of no professional, business, or volunteer position or responsibility, including vendor situations, that might give rise to conflicts (check here):

---

**I certify that, if elected, I will perform all duties and attend all meeting required of the office, including mandatory training sessions and leading or attending leadership sessions prior to the beginning of the elective year.**

**I certify that I have read and understand the job description, role, responsibilities and expense policies of the position to which I am applying.**

**Signature of Nominee:** \_\_\_\_\_

*Please Enclose or Attach Recent Photograph of Nominee.*