**GREATER MILWAUKEE ASSOCIATION OF REALTORS®**

**NOMINATING COMMITTEE APPLICATION FOR DIRECTORS**

***Application Deadline: September 1, 2019***

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

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

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

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**I. EDUCATION**

Circle the last year of education completed:

 Primary School High School College Advanced Degree

 6 7 8 9 10 11 12 1 2 3 4 1 2 3 4

REALTOR® education courses completed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Designations obtained: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**II. REALTOR® AND COMMUNITY ACTIVITIES**

Number of years holding REALTOR® membership \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Check the appropriate category that reflects your primary business:

 \_\_\_\_Single Family Brokerage \_\_\_\_Commercial Brokerage \_\_\_\_Industrial Brokerage

 \_\_\_\_Farm and Land Brokerage \_\_\_\_Property Management \_\_\_\_Appraisals

 \_\_\_\_Counseling \_\_\_\_Building & Development \_\_\_\_Mortgage Financing

 \_\_\_\_Securities Brokerage \_\_\_\_Other (specify)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What specific areas of the real estate industry do you feel you have a greater depth of knowledge in? (examples: mortgage industry, technology, home inspection, international, etc…)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Total number of associates in your office: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Local association participation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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State association participation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Local community activities: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**III. ADDITIONAL INFORMATION**

Have you ever been involved in any activities which would have caused you to be reprimanded, suspended by the state real estate commission, or had your license revoked? \_\_\_\_\_\_Yes \_\_\_\_\_\_No

If so, please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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GMAR Directors are required to attend as many association events and Directors meetings as possible (missing three meetings constitutes an automatic resignation).

Would you have difficulty meeting this requirement? \_\_\_\_\_\_Yes \_\_\_\_\_\_No

Do you have any problems in the following areas which would impair your ability to serve as a local Director?

 Health: \_\_\_\_\_\_Yes \_\_\_\_\_\_No

 Financial: \_\_\_\_\_\_Yes \_\_\_\_\_\_No

 Legal: \_\_\_\_\_\_Yes \_\_\_\_\_\_No

If so, please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Have you ever been indicted or convicted of a crime? \_\_\_\_\_\_Yes \_\_\_\_\_\_No

If so, please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**IV. REMARKS BY CANDIDATE**

Give any additional information you would like the committee to consider. Use additional paper if needed.

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***EACH APPLICANT IS REQUIRED TO SUBMIT A PHOTO VIA EMAIL TO: michelle@GMAR.WS.***

Candidate's signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_