

GREATER MILWAUKEE ASSOCIATION OF REALTORS®
NOMINATING COMMITTEE APPLICATION FOR DIRECTORS
Application Deadline: September 1, 2018

Name: _____

Firm Name: _____

Business Address: _____

City: _____ Zip: _____ Phone: _____

I. EDUCATION

Circle the last year of education completed:

Primary School
6 7 8

High School
9 10 11 12

College
1 2 3 4

Advanced Degree
1 2 3 4

REALTOR® education courses completed: _____

Designations obtained: _____

II. REALTOR® AND COMMUNITY ACTIVITIES

Number of years holding REALTOR® membership _____

Check the appropriate category that reflects your primary business:

<input type="checkbox"/> Single Family Brokerage	<input type="checkbox"/> Commercial Brokerage	<input type="checkbox"/> Industrial Brokerage
<input type="checkbox"/> Farm and Land Brokerage	<input type="checkbox"/> Property Management	<input type="checkbox"/> Appraisals
<input type="checkbox"/> Counseling	<input type="checkbox"/> Building & Development	<input type="checkbox"/> Mortgage Financing
<input type="checkbox"/> Securities Brokerage	<input type="checkbox"/> 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...) _____

Total number of associates in your office: _____

Local association participation: _____

State association participation: _____

Local community activities: _____

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: _____

A requirement of local Directors is that they attend as many association events and monthly Director meetings as possible (Policy requirement is if a Director misses three meetings that is construed as 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: _____

Have you ever been indicted or convicted of a crime? _____ Yes _____ No

If so, please explain: _____

IV. REMARKS BY CANDIDATE

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

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

Candidate's signature: _____