DIVISION OF AGRICULTUR RESEARCH & EXTENSIO University of Arkansas System		FCS 746 10-2013 Replaces AEHC-D16 and D16	
AEHC District Director Nomination Form			
In odd-numbered years, return this form and attachments to your AEHC District Director by May 15.			
I propose for the office of (name of district): <u>District Director</u>			
Name		County	
Address			
City	State <u>AR</u>	Zip Code	
Phone	Email Address		
QUALIFICATIONS			
1. Number of Years in	Extension Homemakers		
2. Any nominee eligible for any District Director must have previously served as an elected officer of a County Council or as an Associate District Director. Please list elected offices held:			
Local Office held		Date	
County Office held		Date	
State Office held		Date	
3. Please list importan	t committee assignments:		
State Committee		Date	
State Committee		Date	
4. Has the nominee give	ven her or his consent in writing?	If yes, please attach.	
5. Nominees are required to attend the Annual State Meeting at which the election is held. Nominees will be introduced at the first general session and at the Board of Directors Meeting. They will be notified if they are to speak. Will this nominee attend this meeting?			
6. Is the nominee free	to represent AEHC at meetings oth	er than AEHC meetings?	
7. Is the nominee proficient in parliamentary procedure?			

8.	Has the nominee shown leadership in organization and planning?		
	If so, give examples.		
9.	List community activities in which the nominee participates:		
•	Attach a statement giving the nominee's qualifications for the office sought including experiences in leadership roles in EHC and other organizations. This should not exceed one page.		
•	Attach the statement of nominee's consent (see FCS 745) and endorsement by the appropriate officer of the County Extension Homemakers council and the County Extension Agent – Family and Consumer Sciences.		
	 Include up to a 300-word statement that will be placed on the website indicating you are a candidate for the position. Include a photo to be included along with your statement on the website. Application can be submitted electronically but it is your responsibility to confirm the email is received. 		
This	s form was completed by:		
	An elected County Extension Homemakers Officer		
	Address		
	City State AR Zip Code County		
E	Pursuant to 7 CFR § 15.3, the University of Arkansas System Division of Agriculture offers all its Extension and Research programs and services (including employment) without regard to race, color, sex, national origin, religion, age, disability, marital or veteran status, genetic information, sexual preference, pregnancy or any other legally protected status, and is an equal opportunity institution.		