

Official Nomination Form Recommendation for Nomination for International Office

Office					
Office					
Nominee					
Address					
City State/Province Zip/Postal Code					
Phone E-mail					
Phone E-mail					
1. Nominee has been a member in good standing of a chapter(s) of the association for years					
immediately prior to his/her recommendations for nomination.					
2. Has nominee agreed to accept nomination? Yes No					
2. Has nominee agreed to accept nomination? Yes No					
3. Has nominee's employer expressed support of nominee's candidacy? Yes No					
4. Will nominee accept a nomination for an office other than the listed above? Yes No					
 Does nominee meet the qualifications for office as listed in Article V Section 2? Yes No Submitted by 					
Submitted by Title					
Chapter Region					
Onaple:					
International Right of Way Association Summary of Professional Qualifications					
(This summary is required in addition to any resume)					
Date					
Candidate for the Office					
Candidate's Name					
Address					
Chata Duayinaa					
City State/Province Zip/Postal Code					
Phone E mail					
Phone E-mail					
SR/WA# Re-Certification to Date (if required) Member for Years					

Summary of Demonstrated Professional Leadership (Please complete the following and show accomplishments in each)

Local/Chapter Level

Chapter
Decard of Divestors Vestina
Board of Directors Year(s)
Officer (include name of committee) Year(s)
Chair Yes No
Other Significant Local/Chapter Duties or Accomplishments (i.e. newsletter editor, professional of the year, host of annual seminar, etc)
Regional Level Chapter
Опарие
Committees (include name of committee) Year(s)
Chair Yes No Vice Chair Yes No
Other Significant Local/Chapter Duties or Accomplishments (i.e. newsletter editor, professional of the year, host of annual
seminar, etc)
International Level
Committees (include name of committee) Year(s)
Chair V No.
Chair Yes No IEC Position
Other Significant Local/Chapter Duties or Accomplishments (i.e. newsletter editor, professional of the year, host of annual
seminar, etc)
Are you Currently
An approved IRWA Instructor? Yes No
An education foundation contributor? Yes No
Please list the IRWA Courses attended in the past 4 years.

Other Individual capablilities which you wish to share					
Briefly, as a candidate for the above described office, please s Ethics of the Association.	state ho	w you would further the aims and purposes and Code of			
This summary is to be distributed to the Board of Directors to capabilities of International Officer Candidates.	conside	er an individual's depth of the dedication, qualifications and			
I herby certify that the above-described information is current, consent to the distribution of this summary as part of my subn	, comple	ete and accurate to the best of my knowledge. I hereby of information to seek an International Office in the			
Name] i	Date			
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