



DMAAR Application for Leadership Position

Submit this form for the office to which you are a candidate, the application will be used by the Nominating Committee.

Board of Director Member

The primary responsibility of the Board of Directors is to serve as the governing body of the Des Moines Area Association of REALTORS®, Inc. The Board of Directors approves policies and plans that provide the framework within which major Association operations must be accomplished. Although the Board of Directors is responsible for the general overall management of the Association affairs, it is not responsible for the day-to-day operations. This is accomplished by the Chief Executive of the Association in close coordination with the Executive Committee.

Absence. Absence from four (4) regular meetings of the Board of Directors while holding office in any twelve (12) month period shall be deemed a resignation. After the third (3) absence, a written notice will be sent to said Director.

Office of Treasurer

Serves on the Executive Committee and the Board of Directors. Reviews with the Chief Executive and Accountant monthly financial statements. Receive from and approve the various committee's budget requests and serves as co-chair of the Strategic planning committee. Sign checks and documents as necessary. Works with the Chief Executive on financial matters. Reports to the Board of Directors, Executive Committee, Committee Chairs and Membership the Financial condition of the Association with the assistance of the Accountant.

Personal Abilities: Knowledge of Accounting and ability to understand Financial Reports. Available to attend meetings and spend the time necessary to tend to the chores attended to being Treasurer. Have a responsible understanding of investments.

Serves as a voting member, and attends all meetings of the Executive Committee and the Board of Directors. The Treasurer is expected to attend local and state meetings.

Association policy authorizes the Treasurer to be reimbursed for expenses incurred in their travels as representatives of the Association. The purpose of the policy shall be for reimbursement rather than compensation. Once elected as Treasurer the expectation is to move up through the chairs to President.

APPLICATION FOR CONSIDERATION – DES MOINES AREA ASSOCIATION OF REALTORS®

CANDIDATE FOR OFFICE OF:

TREASURER _____
BOARD OF DIRECTOR MEMBER _____

NAME _____

FIRM NAME _____ BUSINESS ADDRESS _____

CITY _____ STATE _____ ZIP _____

BUSINESS TELEPHONE _____ E-MAIL ADDRESS _____

POSITION HELD IN FIRM _____

Why do you wish to hold the office you have been recommended for?

Are you willing to serve in the office you have been recommended for, if elected? _____
Are you aware of the responsibilities and time requirements? _____

HISTORY OF COMMITTEE SERVICE, OFFICES HELD

Previous or Current Licenses in Iowa or other states _____

Previous or Current Committees you have served on: _____

Indicate after each committee or forum, the level served
(L-LOCAL) (S-STATE) (N-NATIONAL) (C-CHAIRPERSON) (VC-VICE CHAIRPERSON)

EXECUTIVE COMMITTEE _____ APPRAISAL _____ BYLAWS _____ PUBLIC RELATIONS _____
EDUCATION _____ EQUAL OPPORTUNITY _____ FINANCE _____ LEGISLATIVE _____
LEGAL REFERENCE _____ MULTIPLE LISTING _____ MARKETING COMM _____
BREAKFAST COMM _____ PROFESSIONAL STANDARDS _____ STRATEGIC PLANNING _____
OTHER(S) _____

Other items applicant feels are relevant to this application _____

What State Meetings have you attended in the last three years? National Meetings?

LEGISLATIVE- BUS/ IN FEBRUARY 20__ 20__ 20__ NATIONAL MEETINGS?

SUMMER	JUNE	20__	20__	20__	_____
CONVENTION	SEPTEMBER	20__	20__	20__	_____
WINTER	DECEMBER	20__	20__	20__	_____

EDUCATION

LIST REAL ESTATE DESIGNATIONS YOU HAVE EARNED _____
 MEMBERSHIP AS REALTOR® # OF YEARS _____
 NUMBER OF YEARS LICENSED _____
 LIST OTHER REALTOR® INSTITUTES, SOCIETIES, AND COUNCILS IN WHICH YOU HOLD
 MEMBERSHIP _____

Optional:
 Date of Birth _____ Place of Birth _____
 Marital Status _____ Spouse's Name _____ No. of Dependents _____
 Residence Address _____

I, THE UNDERSIGNED, ACKNOWLEDGE THAT I SEEK THE POSITION FOR THE OFFICE OF
 _____ OF THE DES MOINES AREA ASSOCIATION OF REALTORS® AND
 AM WILLING TO SERVE, IF ELECTED.

I UNDERSTAND THAT THIS OFFICER REQUIRES THAT I KEEP MYSELF INFORMED OF THE
 ISSUES FACING THE DES MOINES AREA ASSOCIATION OF REALTORS®.

I PLEDGE TO REPRESENT THE CONSENSUS OF THESE OPINIONS TO THE BEST OF MY ABILITY.
 I WILL ALSO UPHOLD AND SUPPORT DECISIONS MADE BY THE DES MOINES AREA
 ASSOCIATION OF REALTORS® THROUGH THE EXPRESSED WILL OF THE MAJORITY.

ACTIVITIES IN OTHER PROFESSIONAL ORGANIZATIONS, CHURCH, COMMUNITY AFFAIRS,
 CIVIC AND COMMUNITY.

 Print/Type name of Applicant

 Signature of Applicant

This application will be considered by the nominating committee.
 Please return this form by **Friday, August 16th at 5:00pm** to:
 Des Moines Area Association of REALTORS®, 1370 N.W. 114th Street, Suite 100, Clive, IA 50325 or email
 to Cindy@iowarealtors.com