



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): District Director					
Nam	e			County	
Address					
City		State	AR	Zip Code	
Phor	ne	Email A	ddress		
QUALIFICATIONS					
1.	Number of Years in Exter	nsion 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 important com	mittee assignments:			
	State Committee			Date	
	State Committee			Date	
4.	Has the nominee given he	er 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 other than AEHC meetings?				
7.	Is the nominee proficient	in parliamentary pro	cedure?		

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.				
	<ul> <li>Include up to a 300-word statement that will be placed on the website indicating you are a candidate for the position.</li> <li>Include a photo to be included along with your statement on the website.</li> <li>Application can be submitted electronically but it is your responsibility to confirm the email is received.</li> <li>s form was completed by:</li> </ul>				
	An elected County Extension Homemakers Officer				
	Address				
	City State AR Zip Code County				
	Divergent to 7 OFD S 45 2, the University of Automage Cyptom Division of Agriculture offers all its				
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.