

NAIW Candidate Form for:

National

Regional

State

√	NATIONAL POSITIONS	√	REGIONAL POSITIONS	√	STATE POSITIONS
	<i>Deadline for submission is First Friday in October</i>		<i>Deadline for submission is January 15th</i>		<i>Deadline for submission is August 1st</i>
	President-elect		Regional Vice President		State Director-Elect
	Vice President		Regional Delegate to National Nominating Committee		State Committee: _____
	Secretary		Regional Alternate to National Nominating Committee		State Other: _____
			Regional Other: _____		

Name

Employer

Mailing Address

Home Phone	Work Phone
Fax Number	Email Address
Region	Date Joined NAIW

Local Association Affiliation (Name of Assn.) **Member-At-Large**

Insurance Education / Designations

State / Region / National Meeting Attendance

State Meetings Attended _____ Date of last State Meeting Attended _____

Regional Conferences Attended _____ Date of last Regional Conference Attended _____

National Conventions Attended _____ Date of last National Convention Attended _____

Indicate prior Committee service to NAIW (State, Region, National)

What qualifications and/or qualities do you have that would make your service valuable to NAIW? (Include employment responsibilities, if applicable)

PLEDGE OF WILLINGNESS TO SERVE

I, being fully aware of the duties and responsibilities of this position, sincerely pledge to serve to the best of my ability, if elected.

Date _____ Candidate Signature _____

Return Instructions: National forms should be sent to NAIW National; Regional forms to Regional Vice President; & State forms to State Director.

NAIW ACTIVITIES / INVOLVEMENT / RECOGNITION

(Included Attachments as desired or necessary)

Local Association

State/Provincial

Regional

National

Other Insurance

Civic Activities

NAIW Candidate Form for Local Associations

Position

Officer _____
 Committee Chairman _____
 Other _____

Name	
Employer	
Mailing Address	
Home Phone	Work Phone
Fax Number	Email Address
Region	Date Joined NAIW
Insurance Education / Designations	
Local / State / Region / National Meeting Attendance	
# Local Association Meetings Attended	Date of Last Association Meeting Attended
# State Meetings Attended	Date of last State Meeting Attended
# Regional Conferences Attended	Date of last Regional Conference Attended
# National Conventions Attended	Date of last National Convention Attended
Indicate prior Committee service to NAIW (Local, State, Region, National)	
What qualifications and/or qualities do you have that would make your service valuable to NAIW? (Include employment responsibilities, if applicable)	
PLEDGE OF WILLINGNESS TO SERVE	
I, being fully aware of the duties and responsibilities of this position, sincerely pledge to serve to the best of my ability, if elected.	
Date _____	_____ Candidate Signature

Return Instructions: *Local Position forms should be sent to your Local Association President*

Contact www.NAIW.org to download form

NAIW ACTIVITIES / INVOLVEMENT / RECOGNITION

(Included Attachments as desired or necessary)

Local Association

State/Provincial

Regional

National

Other Insurance

Civic Activities