



Consent to Serve

California State Officers - 2017 Term of Office

I agree to serve as _____ of the Women’s Council of REALTORS® - California for the year _____. I acknowledge and accept my fiduciary obligation to act in the best interests of the State organization as follows:

- 1. Duty of Care: I will use the care that a reasonably prudent person would exercise in a like position and under similar circumstances. This means that I agree to attend meetings, ask questions to gain the information I reasonably need to make a decision and exercise independent judgment.
- 2. Duty of Loyalty: I will advance the best interests and well-being of the Women’s Council of REALTORS® - California over any individual or local chapter interests, and I will refrain from using my position of trust to further my own interests in a way that conflicts with the interests of Women’s Council.
- 3. Duty of Obedience: I will accept, support and implement Governing Board decisions, even if I voted against them I will follow the Bylaws of Women’s Council of REALTORS® and Standing Rules and comply with all state and federal laws relating to Women's Council activities.
- 4. Duty of Confidentiality: I will not discuss matters deemed confidential by the Governing Board outside of board meetings without the express advance permission of the Women’s Council of REALTORS® president.
- 5. Travel & Time: I understand the time and travel requirements for the position that I have been elected to serve. I will make every effort to give of my time to meet the requirements of this position. I accept my position with the understanding I may not be funded for all or any of my expenses while performing my volunteer duties. I agree to attend the State Leadership Planning Retreat, October 10-13, 2016

Additionally, I will not speak or act for Women’s Council of REALTORS® - California or the Governing Board unless specifically authorized to do so. I will not present opinions about Women’s Council business unless those opinions are clearly expressed as personal opinions not necessarily the views of Women’s Council.

My signature below acknowledges that I agree to be bound by the terms of consent above.

Signature

(Printed Name)

Date _____



Candidate Application

Name: _____ Network Name: _____

Company Name: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Primary #: _____ Cell/Text: _____

E-Mail: (mandatory) _____ Web Site: _____

Name of your Local REALTOR® Board/Association(s) _____

Number of years a Licensee: _____ Number of years as a Women’s Council member _____

Is real estate your full time occupation? (Circle One): Yes No (if no, please explain)

Do you have any known health, financial or other circumstance that could limit your ability to serve?
Circle One: No Yes (If yes, please, describe)

REALTOR® Designations Earned and Currently Maintained: (Circle all that apply)

ABR ABRM ARM CCIM CIPS CPM CRE CRB CRS GRI PMN SRES SIOR e-PRO

REALTOR® Certifications Earned and Currently Maintained: _____

Broker Notary (Circle all that apply)

Primary District Preference _____ Secondary District Preference _____

State Governor and District Vice President candidates must select a primary district for service and may select additional districts in orders of preference in the event the primary is not available.
(See Appendix A to Standing Rules to determine district)

Please Note: There will be no campaigning allowed until the completion of the Spring State meeting. Campaigning is appropriate at the Fall State meeting.



Fill out all that apply. Please indicate the year of your term (e.g. 2015 ~ 2016)
Describe significant accomplishments/contributions; use extra sheet of paper if necessary.

Women’s Council of REALTORS® Experience

Women’s Council of REALTORS® State Officer:

Governor Year(s) Served _____
District Vice President Year(s) Served _____
Treasurer Year(s) Served _____
Secretary Year(s) Served _____
President-Elect Year(s) Served _____
President Year(s) Served _____

State Committee Chair/Vice-Chair:

Committee Name/s _____ Year(s) Served _____
Committee Name/s _____ Year(s) Served _____
Committee Name/s _____ Year(s) Served _____
Committee Name/s _____ Year(s) Served _____
Committee Name/s _____ Year(s) Served _____

State Committee Member:

Committee Name/s _____ Year(s) Served _____
Committee Name/s _____ Year(s) Served _____
Committee Name/s _____ Year(s) Served _____
Committee Name/s _____ Year(s) Served _____
Committee Name/s _____ Year(s) Served _____

Women’s Council of REALTORS® Local Network:

Membership Director Year(s) Served _____
Program Director Year(s) Served _____
Secretary / Treasurer Year(s) Served _____
President-elect Year(s) Served _____
President Year(s) Served _____

Local Network Committee/Project Team:

Committee Name/s _____ Year(s) Served _____
Committee Name/s _____ Year(s) Served _____
Committee Name/s _____ Year(s) Served _____
Committee Name/s _____ Year(s) Served _____
Committee Name/s _____ Year(s) Served _____



Women’s Council of REALTORS® National Leadership

Chair/Vice Chair of a National Strategic Committee (*List the three most current*):

Committee Name/s _____ Year(s) Served _____
Committee Name/s _____ Year(s) Served _____
Committee Name/s _____ Year(s) Served _____

Member Strategic Committee or Work Group (*List the three most important*)

Committee Name/s _____ Year(s) Served _____
Committee Name/s _____ Year(s) Served _____
Committee Name/s _____ Year(s) Served _____

Women’s Council of REALTORS® Leadership Academy Graduate Yes No Year:

REALTOR® Association Leadership Experience

California Association of REALTORS® / National Association of REALTORS®: (*Underline all that apply*)

National Director: Year(s) Served _____
State Director: Year(s) Served _____

California Association of REALTORS® - Committee Chair/Vice-Chair

Committee Name/s _____ Year(s) Served _____
Committee Name/s _____ Year(s) Served _____
Committee Name/s _____ Year(s) Served _____
Committee Name/s _____ Year(s) Served _____
Committee Name/s _____ Year(s) Served _____

California Association of REALTORS® - Committee *Appointed/Volunteer* Member:

Committee Name/s _____ Year(s) Served _____
Committee Name/s _____ Year(s) Served _____
Committee Name/s _____ Year(s) Served _____
Committee Name/s _____ Year(s) Served _____
Committee Name/s _____ Year(s) Served _____



National Association of REALTORS®/Committee Chair/Vice-Chair/Appointed Member

Committee Name/s _____ Year(s) Served _____
Committee Name/s _____ Year(s) Served _____
Committee Name/s _____ Year(s) Served _____

National Association of REALTORS® Leadership Academy Graduate: Yes No Year: _____

Local Association of REALTORS®: (Circle all that apply):

President Year(s) Served _____
President-Elect Year(s) Served _____
Secretary Year(s) Served _____
Treasurer Year(s) Served _____
Director: Year(s) Served _____

Committee Chair/Vice-Chair

Committee Name/s _____ Year(s) Served _____
Committee Name/s _____ Year(s) Served _____
Committee Name/s _____ Year(s) Served _____
Committee Name/s _____ Year(s) Served _____
Committee Name/s _____ Year(s) Served _____

Do you have any other major accomplishments that have not yet been included in the application? Please share:
