

NOMINATION/APPLICATION FORM

Nominee Data (Please Type or Print)

Section I

Nomination for the Position of:

Chapter:

Last Name:

First Name:

Company:

Title:

Mailing Address:

Dept:

City:

ST:

Zip:

Phone No:

Fax No:

Email:

Member ID Number:

Signature: _____

Are you nominating yourself? Yes No

If yes please proceed to Section III below. If no, fill out Section II and then please forward the application to the prospective nominee for completion.

Nominator Data (Please Type or Print)

Section II

Last Name:

First Name:

Company:

Title:

Mailing Address:

Dept:

City:

ST:

Zip:

Phone No:

Fax No:

Email:

Member ID Number:

ILEA Involvement

Section III

Member since _____

Chapter office(s) held

Office _____ Year(s) _____

Office _____ Year(s) _____

Office _____ Year(s) _____

Office _____ Year(s) _____

Please list the Chapter Committee(s) on which you have served. (i.e. Membership, Education)

Committee _____ Position _____

Committee _____ Position _____

Committee _____ Position _____

International office(s) held

Office _____ Year(s) _____

Office _____ Year(s) _____

Please list the International Committees or task forces on which you have served. (i.e. Membership, Professional Development, MARCOM)

Committee _____ Position _____

Committee _____ Position _____

Committee _____ Position _____

Candidate Statement and Questions

Section IV

Explain in less than fifty words why you are running for Chapter office. (Your candidate statement will be included on the information sent to the Chapter membership.)

What is your greatest strength that you bring to your ILEA Chapter?

What area do you consider to be your weakest? How do you plan to compensate?

Additional Comments:

What three areas do you feel are the most important to address for the Chapter during your ILEA tenure?

What is your vision of your ILEA Chapter for the next two years?

Time Commitment Statement *(All nominees must read and sign.)* **Section V**

The International Live Events Association strongly recommends that all nominees consult with their supervisors, business partners, etc. and discuss the time commitment required for service to the Association, and seek their support.

In addition to attendance at ILEA Live, The Special Event, and Regional Leadership meetings, the time commitment to serve as a Chapter Leader will include, at a minimum, one meeting per month of about two hours each, plus individual and task force assignments which must be conducted on your own time and attendance at Chapter functions.

Please sign the following statement

I understand the time requirements needed to carry out the duties as a Chapter Leader of ILEA. I feel that I am able to carry out both the duties of my current employment and the duties of an ILEA office.

Signature: _____

Please return the Call for Nominations form to **Dovie Lopex via email mail to info@ileadenver.com.**

DEADLINE FOR RETURN: February 26, 2018