

## AEHC District Director Nomination Form

I propose for the office of \_\_\_\_\_ District Director.  
District

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State/Zip Code

\_\_\_\_\_  
County

\_\_\_\_\_  
Telephone Number, include Area Code

\_\_\_\_\_  
E-Mail Address

### Qualifications

1. Number of years in Extension 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 Date Held

\_\_\_\_\_  
County Date Held

\_\_\_\_\_  
State Date Held

3. Please list important committee assignments:

\_\_\_\_\_  
State Date Held

\_\_\_\_\_  
State Date Held

4. Has the nominee given her/his consent in writing? \_\_\_\_\_ If so, please attach.
5. Nominees are required to attend the Annual State Meeting at which the election is held. Will this nominee attend the Annual State Meeting? \_\_\_\_\_
6. Is the nominee free to represent AEHC at meetings other than AEHC meetings? \_\_\_\_\_
7. Is the nominee proficient in parliamentary procedure? \_\_\_\_\_
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 and endorsement by the appropriate officer of the County Extension Homemakers Council and the County Extension Agent - Family and Consumer Sciences.

This form was completed by \_\_\_\_\_  
An Elected County Extension Homemakers Officer  
\_\_\_\_\_  
Address/City/State/Zip Code/County

**Return this form and attachments to your current  
District Director by May 15.**