



Please indicate the applicable position for this nominee.

LB President _____

LB Director _____

Nomination Form For The Position Of State Director

Name:

Company Name:

Business Address

City/State/Zip

Home Address

City/State/Zip

Business Phone #:

Home Phone #:

Facsimile #:

() _____ () _____ () _____

Email Address

1. Have you been REALTOR® in good standing for a minimum of two consecutive years?

____ Yes

____ No

(If you answered "yes", please indicate which years.)

2. Attach (or use the space below) a history of your attendance and/or participation in official meetings of the Louisiana REALTORS®, as well as the Teams you have chaired and/or vice chaired, within the past 6 years:

3. Comments:

Nominee's Name (Please Print)

Date