## <u>Required Documentation and Signature Addendum – Regional Directors</u>

## Directions:

For each item which you selected "Yes" to on the Application for Georgia REALTORS® Officers, please complete the following and where applicable, obtain a signature from a staff person with the local board, institute, society or council who will verify your service/participation. For items requiring a signature, in lieu of a signature only, you may submit a copy of an email from the appropriate staff person verifying/confirming the information (be sure to mark "Additional Pages Attached" and list all included emails). You must still complete all other fields for items in which you selected "Yes" on your Application unless indicated otherwise.

This Addendum must be completed and submitted by 11:59 PM on April 15 to <u>campaignapplications@garealtor.com</u> along with your Application for Georgia REALTORS® Officers.

•	Graduate of the GAR Leadership Academy
	• Year
•	Graduate of the NAR Leadership Academy, local board, or any other Institute, Society, or Council Leadership
	Academy.
	• Year
	Which group?
	Staff Signature (not required for NAR Leadership Academy)
	Staff Name (not required for NAR Leadership Academy)
•	Served as a local association/board President or Officer or served as a President or Officer of a local, state, o
	National Institute, Society, or Council.
	• Year
	• Which group?
	What Position?
	Staff Signature (required)
	Staff Name (required)
•	Served as a Chair or Vice Chair of a local association/board committee.
	• Year
	Which Local Board/Association?
	Committee Name?
	• Which Position?
	Staff Signature (required)
	Staff Name (required)

• Serv	red on two (2) or more local association/board committees.
•	s Committee?
	Which local board/association?
•	Year
•	Staff Signature (required)
•	Staff Name (required)
• 2	2 <sup>nd</sup> Committee?
•	Which local board/association?
•	Year
•	Staff Signature (required)
•	Staff Name (required)
• `	Years
	Which Local Board(s)/Association(s)?
	Staff Signature (required)
	Staff Name (required)
	Staff Signature (if necessary)
• ,	Staff Name (if necessary)
	red as a Chair or Vice Chair of a GAR Committee, Council, Forum, or Network.
• (	Committee Name?
	Which Position?
Serv	red on two (2) or more GAR committees in the last three (3) years.
	Year
	2nd Committee ?
	Year
Serv	red on a GAR Presidential Advisory Group or Task Force. Year
	Name of Presidential Advisory Group or Task Force?
	· · ·

•	Served as a GAR State Director for a minimum of one (1) of the last four (4) years.			
	• Year			
•	Attended any two (2) of the GAR Conferences in the last two (2) years (Conferences are Inaugural and			
	Annual).			
	• Year	Conference: □ Inaugural □ Annual		
	• Year	Conference: □ Inaugural □ Annual		
•	Served as a Chair or Vice Chair of a NA	R, or Institute, Society, or Council committee.		
	• Year			
	Which group?			
	Committee Name?			
	Staff Signature (not required for NAR Committee)			
		ommittee)		
•	Served on one (1) or more NAR committees.			
	• Year			
	Committee Name?			
•	Served as an NAR Director.			
	• Year			