Buffalo Niagara Association of REALTORS®, Inc.

[] NYSAR Director Nomination Form

Minimum Qualifications:

Be a member of BNAR for a minimum of three (3) years and shall have served on at least one (1) BNAR Committee

Name:		Date:
Designation	s:	
Company:		
Address: _		
Position wit	h Firm:	
Voice Mail Number:		E-Mail:
Do you acce	ess the Internet?: [] Yes	s [] No Frequency:
Number of	Years Licensed as a Brok	xer or Associate Broker:
Are you cur	rently a voting member of	of BNAR? [] yes [] no
Number of	Years Licensed as a Sales	s Associate:
Number of	Offices:	
Are you awa	are of the responsibilities	and time requirements of service as a Director? [] Yes [] No
Business:	[] Residential [] Commercial [] Industrial [] Farm & Land [] Property Management [] Appraising [] Home Inspections [] Counseling [] Building & Development [] Mortgage Financing	
Local Assoc	· ·	s held within the Association of REALTORS® including

Additional comments:
NAR and NYSAR Association Activity: Positions held within the Associations including committees:
List REALTOR® Institutes, Societies and Councils in which you hold membership, if any:
Other Activities: Briefly describe other business related activities:
Remarks by Candidate: Give any additional information including why you should be consident candidate for the office of Director:
Signature: