



# FLORIDA JUNIOR CHAMBER INTERNATIONAL STATE OFFICER NOMINATION SUBMISSION

The (*chapter name*) \_\_\_\_\_ Junior Chamber, a fully chartered chapter of the Florida Junior Chamber, desires to submit the candidacy of (*full name*) \_\_\_\_\_ for the officer of \_\_\_\_\_ of the Florida Junior Chamber.

*We submit the following information:*

### 1. Candidate's Personal Information

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Birth Date: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

### 2. Candidate's Employment Data:

Place of Employment: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### 3. Candidate's Family Data:

Spouse's Name: \_\_\_\_\_ Number of children, if any: \_\_\_\_\_

### 4. Candidate's Jaycee History:

Date Enrolled in the Junior Chamber: \_\_\_\_\_ Home Chapter: \_\_\_\_\_

### 5. Offices held by the Candidate:

Local Offices Held:	Date (from)	Date (to)
_____	_____	_____
_____	_____	_____
_____	_____	_____

State or National Offices Held:	Date (from)	Date (to)
_____	_____	_____
_____	_____	_____
_____	_____	_____



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## 6. Committee Chairmanships held by the candidate:

Local Committee Chairmanships:	Date (from)	Date (to)
_____	_____	_____
_____	_____	_____
_____	_____	_____

State / National Committee Chairmanships:	Date (from)	Date (to)
_____	_____	_____
_____	_____	_____

## 7. Other Junior Chamber Positions held by the candidate:

Local / State / National positions:	Date (from)	Date (to)
_____	_____	_____
_____	_____	_____

8. Our candidate is financially able to accept responsibility of office:  Yes  No

9. Our organization guarantees its unqualified support of candidate:  Yes  No

## 10. LOCAL ORGANIZATION MEMBER ENDORSEMENT

We, the undersigned officers of the (*chapter name*) \_\_\_\_\_ Junior Chamber do hereby place before the Elections Committee for the office \_\_\_\_\_ of the Florida Junior Chamber of Commerce, the name of \_\_\_\_\_

Signed: Local President: \_\_\_\_\_ Date: \_\_\_\_\_

Attested: Local Secretary: \_\_\_\_\_ Date: \_\_\_\_\_

## 11. NOMINEE'S STATEMENT

"I have carefully examined the foregoing statement of facts and certify that the statement is true to the best of my knowledge. I further state that, if nominated and elected to serve The Florida Junior Chamber in an official capacity for the coming year, I shall contribute the time, money, and effort necessary to serve to the utmost of my ability."

Signature: \_\_\_\_\_ Date: \_\_\_\_\_