

Officer Nomination Form

Personal: _____ Date: _____

Name: _____

Husband's First Name: _____

Address: _____

Telephone: _____ Business Phone: _____

Business: _____

Husband's Occupation: _____

Recommended By: _____

Experience:

Past Positions held (local, state, and national level): _____

Other Organizations or Interests: _____

Office desired: _____

Does Applicant Understand Goal Of CattleWomen? Yes _____ No _____

Does she attend State Conventions and Seminars? Yes _____ No _____

Does applicant have any limitations? _____

Is she aware of this recommendation? Yes _____ No _____

Has she agreed to take the office you recommend? Yes _____ No _____

Would applicant take another office if asked? Yes _____ No _____

VII - CONSTITUTION