

# DISTRICT LEADER NOMINATING FORM



*These materials are confidential. District Leadership Committee (DLC), upon completion of voting, submit all forms to the committee chair to destroy after the final report has been distributed to the district director.*

Are you interested in nominating yourself or someone else for a district leader position? If so, please complete the form below and submit it to your district director or to the DLC. If you are nominating someone besides yourself, you may submit more than one person's name for each position.

To be nominated or elected and to hold office, a member must meet the following requirements:

- ▶ **Be a member in good standing of a Toastmasters club in good standing.**
- ▶ Meet the **qualifications** of the position.
- ▶ Consent to being nominated and sign the **Officer Agreement and Release Statement**.

I wish to have the director or DLC consider the following member for the office of:

- District Director
- Program Quality Director
- Club Growth Director
- Division Director (please specify division \_\_\_\_\_)

***If applicable:***

- Area Director (please specify area \_\_\_\_\_/division \_\_\_\_\_)
- Administration Manager
- Finance Manager
- Public Relations Manager

Name of nominee \_\_\_\_\_ Are you nominating yourself?  Yes  No

Address \_\_\_\_\_

City \_\_\_\_\_

State/Province \_\_\_\_\_ Postal code \_\_\_\_\_ Country \_\_\_\_\_

Telephone \_\_\_\_\_ Member number \_\_\_\_\_

Email \_\_\_\_\_

Home club name \_\_\_\_\_ Club number \_\_\_\_\_

Educational Awards  CC  ACB  ACS  ACG  CL  ALB  ALS  DTM

Other \_\_\_\_\_

To assist the district leadership committee member in their deliberations, please attach:

- ▶ Additional information you would like to include about this candidate.
- ▶ A description of any club and district offices held by the nominee (include dates of service if possible).
- ▶ Why you believe the nominee should be considered for the specified position.

Submitted by \_\_\_\_\_ Date \_\_\_\_\_

## **Mail, fax or email to your district director or DLC.**

Forms are submitted directly to district director/DLC. Please see your district website for specifics.

<https://www.toastmasters.org/Leadership-Central/District-Websites>

# OFFICER AGREEMENT AND RELEASE STATEMENT

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## Directions

Toastmasters International requires that any candidate running for and/or holding office, whether elected or appointed, agrees to and signs the Officer Agreement and Release Statement below. Please submit your signed statement to the chair of the District leadership committee (DLC). Completed statements will be submitted to the district director. Then, only the statements of newly elected and appointed leaders will be sent to District Services at World Headquarters ([districts@toastmasters.org](mailto:districts@toastmasters.org)) to be kept on file.

## Officer Agreement and Release Statement

Consistent with my desire to take personal responsibility for my conduct, individually and as an officer of Toastmasters International and as a member of a Toastmasters club, I agree to abide by the principles contained in "A Toastmaster's Promise" and the governing documents of Toastmasters International and my club. I will fully comply with my fiduciary duties to Toastmasters International under its governing documents and the law of the land. I will refrain from any form of discrimination, harassment, derogatory, illegal, or unethical conduct, and I understand that if I engage in such conduct, I may be responsible to reimburse Toastmasters International, my club or other clubs, or other individuals involved with Toastmasters, for any damages, losses, or costs resulting from my conduct. Understanding that Toastmasters programs are conducted by volunteers who cannot be effectively screened or supervised by Toastmasters International or its clubs, I release and discharge Toastmasters International, its clubs, governing bodies, and representatives from any liability for the intentional or negligent acts or omissions of any member or officer of my club or other clubs, or any officer of Toastmasters International.

## Confirmation

I have read and agree to the terms and conditions of the Officer Agreement and Release Statement.

Full name (please print) \_\_\_\_\_ Member Number \_\_\_\_\_

Officer position \_\_\_\_\_

Area (if applicable) \_\_\_\_\_ Division (if applicable) \_\_\_\_\_ District \_\_\_\_\_

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