

**Deadline – Friday, September 6, 2019**

Organizations can only succeed with effective leadership. Members of the DMAW have responded to the call for leadership since the organization was founded in 1955 – 65 years ago! It is through the service of dedicated member volunteers that the organization has been able to successfully address the always changing needs of its members.

The Nominating Committee seeks candidates for nominations for directors to serve on the **2020-2021 Board of Directors**.

**NOMINATOR\*** \_\_\_\_\_

Company Name \_\_\_\_\_ City/State \_\_\_\_\_

Nominator's Signature \_\_\_\_\_ Date \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**I hereby recommend consideration of the following person as a candidate for nomination to the DMAW Board of Directors:**

**NOMINEE\*** \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_

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

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_ Co. URL \_\_\_\_\_

I, \_\_\_\_\_ believe this person can fulfill the responsibilities of a Board member because *(a separate sheet can be attached if need be)*:

**\*If self-nominating, please provide two (2) references.**

**Please have the Nominee complete the rest of the application:**

**NOMINEE'S BUSINESS EXPERIENCE - Please select the area that best describes you:**

**END USER**

- |  |                                      |
|--|--------------------------------------|
| <input type="checkbox"/> Agency (Direct Marketing or General Ad) | <input type="checkbox"/> Nonprofit   |
| <input type="checkbox"/> Association                             | <input type="checkbox"/> Publishing  |
| <input type="checkbox"/> Education                               | <input type="checkbox"/> Retail      |
| <input type="checkbox"/> Financial                               | <input type="checkbox"/> Technology  |
| <input type="checkbox"/> Government                              | <input type="checkbox"/> Union       |
| <input type="checkbox"/> Healthcare                              | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Telemarketing                           |                                      |

**SUPPLIER**

- |   |  |
|---|--|
| <input type="checkbox"/> Ad Specialty             | <input type="checkbox"/> Full Service        |
| <input type="checkbox"/> Analytical Services      | <input type="checkbox"/> Lettershop          |
| <input type="checkbox"/> Computer Services        | <input type="checkbox"/> List broker/Manager |
| <input type="checkbox"/> Electronic (multi-media) | <input type="checkbox"/> Printer             |
| <input type="checkbox"/> Envelope Manufacturer    | <input type="checkbox"/> Other _____         |
| <input type="checkbox"/> Fulfillment              |  |

**INDEPENDENT CONSULTANT**

- Copywriter
- Design
- Consultation/strategy
- Other \_\_\_\_\_

**INTEREST AREAS**

- B2B
- E-Commerce
- List professionals
- Telemarketing
- Catalogs
- Fulfillment
- Production
- Charitable Fundraising
- Database marketing
- Political Fundraising
- Other \_\_\_\_\_

1. How many years have you been in your line of work? \_\_\_\_\_
2. How long have you been with your present firm? \_\_\_\_\_
3. What **DMAW**-sponsored activities have you participated in, when and as a volunteer or attendee?

**NOMINEE'S PERSONAL CONTRIBUTION**

**Please indicate your volunteer areas of interest**

- Copywriting
- Graphic Design
- Marketing
- Membership, Recruitment & Retention
- Programs
- Website
- Sponsorship
- Finance
- Volunteer Recruitment/Management
- Social Media
- Other \_\_\_\_\_

What experience, expertise, passion, and commitment to service do you feel you would bring the Board to address various challenges facing the industry and the Association? *(A separate sheet can be attached if need be.)*

**NOMINEE'S ACCEPTANCE**

I am aware that my name is being submitted for consideration as a candidate for nomination to the DMAW Board of Directors, and if elected, I am willing to serve a two-year term. I am a member in good standing with the Association and I certify that all information provided on this form is correct.

I agree to actively serve on the DMAW Board of Directors, as a volunteer, to be objective in my considerations of policy issues and to represent the best interest of the association and the membership at all times. I have full support of my employer in regard to the duties and the responsibilities of the office that I am seeking.

I agree to attend and fully participate in all board meetings to the best of my ability; to attend and participate in assigned committee meetings to the best of my ability; to arrive for Board and committee meetings fully briefed and prepared on the issues to be discussed; to promote the programs, goals and products of DMAW; and to faithfully discharge duties that may be assigned to me by the Board from time to time.

Nominee \_\_\_\_\_

Company Name \_\_\_\_\_ Title \_\_\_\_\_

Nominee's Signature \_\_\_\_\_ Date \_\_\_\_\_

**PLEASE NOTE:** The Board Nomination Form must be returned to DMAW to:  
Donna Tschiffely, Executive Director, 11709 Bowman Green Drive, Reston, VA 20190  
Phone: 703-689-DMAW (3629) | Fax: 703-481-3629 | email: [donna@dmaw.org](mailto:donna@dmaw.org)