



**DEMOCRATIC WOMEN'S CLUB OF FLORIDA, INC.**

**CANDIDATE DATA FOR STATE OFFICE OR REGION CHAIR**

Office which you are seeking: \_\_\_\_\_

Name of Candidate: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home phone:( ) \_\_\_\_\_ Bus. phone:( ) \_\_\_\_\_ Fax:( ) \_\_\_\_\_

E-Mail: \_\_\_\_\_

Region: \_\_\_\_\_ Club: \_\_\_\_\_

Length of time in DWCF, Inc.: \_\_\_\_\_

DWCF Inc. Organization experience: (Offices held, Committees, etc./dates): \_\_\_\_\_

Local Club: \_\_\_\_\_

Region: \_\_\_\_\_

State: \_\_\_\_\_

Meetings attended (dates within past five (5) years):

State Board of Directors: \_\_\_\_\_ State Conventions: \_\_\_\_\_

State Special Meetings: (Seminars, Workshops etc.): \_\_\_\_\_

National Federation Meetings: (Conventions, Workshops, etc.) \_\_\_\_\_

Other Affiliations: (positions held) \_\_\_\_\_

**CANDIDATES AGREEMENT TO RUN FOR OFFICE**

I certify that I am a registered Democrat in County, FL. If elected to a state office or region chair in the DWCF, Inc., I promise to fulfill the obligations of that office to the best of my ability, giving freely of my time and talents in furthering the progress of the DWCF Inc., and I will support the Aims, Goals, and Objections of the organization.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Candidate for Office

- DWCF, Inc. by laws call for the election of officers at the State Convention in odd-numbered calendar years.
- Officers elected by the Delegates in attendance at the Convention are: President, 1st Vice President, 2nd Vice President, Recording Secretary and Treasurer.

One of the following qualifications is required for a candidate to run for office:

1. Active member of at least four (4) years,
2. Served as an active member of the Board of Directors for at least one full term (2 years).
3. Served as a Committee Chair.

*Note: Region Chairs and Region Vice Chairs are elected at their Region Caucus during the Convention.*