**IAHPERD Council for Future Professionals**

**President – Elect Nomination Form**

**Job Description:**

The elected person will be asked to serve for three years. (President-Elect, President, and Past President) Each of the positions will be one year in length. The position requires that the person be a liaison between the Council for Future Professionals and the IAHPERD Executive Board and the IAHPERD Representative Assembly. **When applying the applicant MUST be a Sophomore or Junior at their university.**

**Duties for the Position:**

* Attend all required meetings and IAHPERD state functions
* Organize and run the IAHPERD Student Leadership Conference
* Help plan all student sessions and help with the volunteers at the State Convention
* Write Journal article(s) and update the CFP portion of the IAHPERD website or other accounts

**Attendance Required at the Following Meetings:**

* **All IAHPERD Executive Board / Convention Planning (when required)**

**meetings (4 per year)**

* IAHPERD Representative Assemblies (2 per year)
* IAHPERD State Convention
* Leadership Conferences (State, Midwest, and National)
* National SHAPE America Convention

**Costs of the CFP Leadership roles will be absorbed according to the IAHPERD state budget.**

**Council for Future Professionals**

**Elected Office Nomination Form**

**Part 1**

**Please complete the following items:**

Nominee’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

University: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

University Advisor Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(**Students MUST be in good academic standing with the university.)**

IAHPERD Membership Number Exp. Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Contact Information:**

**University Address:**

Street \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Apt: \_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State: \_\_\_\_\_ Zip\_\_\_\_\_

**Permanent Address:**

Street \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_Zip\_\_\_\_\_

Cell Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Year of Education \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Part 2**

**Briefly describe in a one page typed form why you would like to run for the office and what your goals would be for the year as CFP President. All forms MUST be turned in to the CFP Advisor prior to the state convention. There will be NO nominations from the floor during the CFP business meeting.**

**Return to: Mary Kennedy – 1104 Westfield Drive, Champaign, IL 61821 or email to** **mjwkennedy51@gmail.com**