



**APPLICATION FOR DIRECTOR
FOR TERMS BEGINNING IN 2026**

MISSION: *The NEXUS Association of REALTORS® connects with its members to advance their success and professionalism. We align with consumers to advocate, protect, and preserve private property rights.*

VISION: *The NEXUS Association of REALTORS® is your ultimate professional connection.*

Name: _____

Nickname: _____

Firm Name: _____

Business Address: _____

City: _____ State: _____ Zip: _____

Business Phone : _____ Business Fax: _____

E-mail Address: _____

Home Address: _____

Home Phone: _____

Cell Phone: _____

Hold membership as REALTOR® - number of years: _____

- Applying for President-Elect
- Applying for Director Position (3-year term)
- Additional Resume Attached

REALTOR® history of committee service, offices held, or any other areas of service candidate deems appropriate (include dates of service). Additional pages may be attached.

National Association: _____

State Association: _____

Local Association: _____

Educational designations or certifications attained (check all that apply):

- | | | | | | | | |
|------------------------------|-------------------------------|-------------------------------|--------------------------------|-------------------------------|-------------------------------|--------------------------------|-------------------------------|
| <input type="checkbox"/> ABR | <input type="checkbox"/> ALC | <input type="checkbox"/> ARM | <input type="checkbox"/> AMO | <input type="checkbox"/> CAE | <input type="checkbox"/> CCIM | <input type="checkbox"/> CPM | <input type="checkbox"/> CRB |
| <input type="checkbox"/> CRS | <input type="checkbox"/> CRE | <input type="checkbox"/> CIPS | <input type="checkbox"/> GAA | <input type="checkbox"/> GRI | <input type="checkbox"/> LTG | <input type="checkbox"/> PRE | <input type="checkbox"/> RAA |
| <input type="checkbox"/> RCE | <input type="checkbox"/> SIOR | <input type="checkbox"/> SRES | <input type="checkbox"/> E-PRO | <input type="checkbox"/> AHWD | <input type="checkbox"/> SFR | <input type="checkbox"/> GREEN | <input type="checkbox"/> BPOR |

OTHER: _____

List REALTOR® Institutes, Societies, and Councils in which you hold membership, if any: _____

Check the appropriate box that reflects your primary business:

- | | | |
|--|---|---|
| <input type="checkbox"/> Single-family Brokerage | <input type="checkbox"/> Commercial Brokerage | <input type="checkbox"/> Industrial Brokerage |
| <input type="checkbox"/> Farm and Land Brokerage | <input type="checkbox"/> Property Management | <input type="checkbox"/> Appraising |
| <input type="checkbox"/> Counseling | <input type="checkbox"/> Mortgage Financing | <input type="checkbox"/> Building and Development |
| <input type="checkbox"/> Securities Brokerage | <input type="checkbox"/> Auction | <input type="checkbox"/> Other (specify) _____ |

Provide any additional information that would make you the ideal candidate for an Officer or Director of NEXUS:

Applicant's Signature _____ Date: _____

Please submit no later than **Friday, June 27, 2025 to: NEXUS CEO Vernon Jones via e-mail at vjones@nexusaor.com**