

## ITNS ELECTION - CANDIDATE REFERENCE FORM

*Typing of this document is required. Completed materials should be sent to [lzamora@itns.org](mailto:lzamora@itns.org).*

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

Running for the position of:

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Director-at-Large      | <input checked="" type="checkbox"/> <del>Education Director</del>  | <input type="checkbox"/> Research Director |
| <input type="checkbox"/> President-Elect        | <input checked="" type="checkbox"/> <del>Secretary/Treasurer</del> |  |
| <input type="checkbox"/> International Director |  |  |

I have worked with this candidate when I was:

- ☐ Board Member
- ☐ President-elect
- ☐ President
- ☐ Past-President
- ☐ Committee Chair
- ☐ Special Interest Group Leader
- ☐ Chapter Leader
- ☐ Special Project Leader
- ☐ Other \_\_\_\_\_

I worked with the Candidate during the following time period \_\_\_\_\_ and while with \_\_\_\_\_ (name of organization).

Please give **specific examples** of this candidate's work for ITNS or other organizations through your firsthand experience with the candidate:

Contributions to ITNS or \_\_\_\_\_

Demonstration of Leadership Abilities

Communicates Professionally

Self-Motivation/Self Directed/ Ability to Meet Deadlines

Quality of Work/Excellence

Demonstrates Vision/Creativity/Innovation

Function with Accountability and Integrity

Other information, which may support the candidacy of this individual.

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

Address \_\_\_\_\_

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

***References may be contacted for additional information or clarification of information.***

