

FEDERALLY EMPLOYED WOMEN NATIONAL BOARD OF DIRECTORS 2024-2026

Nomination Procedures, Checklist, and Form

Email your completed Nomination Packet to Nominations@few.org by 5:00 p.m. ET on May 27, 2024

The Nomination Form consists of a 2-page document and must be completed. Use the correct Nomination Form for the desired position.
Nomination Packet and all pages <i>must</i> be in Microsoft Word 2016 or later, 10-point, Times New Roman font
Nominee <i>must</i> write an essay to explain their reason for seeking the position, and their vision and goals for the Office, if elected. <i>Essay must not exceed 300 words</i> .
Nominee <i>must</i> get a signed endorsement from their Chapter President <u>and</u> Regional Manager.
Nominee <i>must</i> review Federally Employed Women Corporate Conduct and Standards Form (National Policy and Procedures Manual (NPPM) Section II – Organization and Responsibilities Appendix – Form B-1).
Be sure to check the appropriate blocks to indicate your possession of skills, knowledge, abilities, and/or experience.
Your Campaign flyer and BIO must be included with the Nomination Packet.
Photograph <i>must</i> be included and submitted in a .JPG format with the Nomination Packet.
Copies of awards, certificates, resumes, etc., <u>should not</u> be included with any Nomination Form.
Nominee <i>must</i> sign the Statement section at the bottom of the Nomination Form, certifying its contents and agreeing to fulfill the duties and responsibilities of the position for which they may be nominated.
Upon completion of the Nomination Form and all additional items are secured, the order of the Nomination Packet is:

- Nomination Form
- Professional Bio
- Campaign Flyer
- Photograph
- * Separate file for each is acceptable

Contact the Nominations Officer if you have any questions about the Nominations process.

<u>Please carefully review your Nomination Packet prior to submission.</u>

Good Luck!



NATIONAL VICE PRESIDENT FOR CONGRESSIONAL RELATIONS

Candidate's Name	
Occupational Title	
Agency / Company	
Region & Chapter	
Personal Email Address and Phone	
Check the boxes below for those s	skills which you currently possess.
Eligibility of All National Officers	Desired Skills of the
All National Officers for this organization shall be currer or retired employees of the federal government or the	
District of Columbia and members in good standing for a least the past three (3) consecutive years and remain	t Thorough knowledge of the legislative process
current for the term of office	Understanding of grassroots advocacy as it relates to FEW's Legislative Program
Held an elected or appointed office at the Chapter, Regional, or National level for at least one (1) term	Extensive knowledge and experience with the
Desired Skills of All National Officers	3-tiered Legislative Program of FEW
Ability to Plan and organize a project Use time management practices Stay focused and set priorities	Knowledgeable of Hatch Act requirements and Provisions
Take responsibility for decisions made Complete a project in a timely manner	The candidate for this position <i>must</i> have their own personal computer to carry out FEW Legislative
Communicate effectively and efficiently both orally and in writing; be proficient in using personal computer, including Microsoft Office (Word, Excel, PowerPoint, and Outlook), Adobe, and Zoom	duties
Work effectively with a group of diverse people to accomplish all tasks as a team	
Availability during non-duty hours for frequently required FEW business activities (up to 20, or more, hours per week). This includes facilitating Zoom meetings and/or on-site functions that increase the visibility of FEW and benefit our members	
Flexibility in your work schedule which allows you to participate in occasional FEW activities during your duty hours	
Willingness to travel to meetings (if required), sometimes at your own expense	
In-depth knowledge of FEW, which includes its History, Mission, Chapter/Regional Requirements, etc.	



Other Skills/Experience not addressed on page 2:

	position (plus) your Vision/Goals for this office, if elected tion about your Knowledge, Skills, and Abilities.
N	
Nominee's Signature & Date Your Signature indicates that all informa	ation on this Nomination Form is true and accurate,
· ·	port FEW and the duties of this position, if elected.
We concur that this Nominee has the ski Note: If you are the Chapter President of Assistant Regional Manager sign.	lls to perform the duties of this office: r Regional Manager, please have your Vice President or
Chapter President's Name	Signature & Date
Regional Manager's Name	Signature & Date