**STATEMENT OF INTEREST FORM  
NAFER BOARD OF DIRECTORS**

**Name:**

**Address:**

**City, State, Zip:**

**Telephone: Email:**

**Years you have been a receiver: Years you have been a NAFER Member:**

**Profession: Average annual number of cases:**

1. Describe why you would like to be a member of the NAFER Board:
2. Describe any significant efforts you have participated in on behalf of NAFER:
3. Describe any significant efforts you have participated in to improve the receivership process:
4. Describe any significant efforts you have participated in on behalf of your specific profession:
5. Describe any other items you would like for the voters to consider:

By submitting this statement of interest, I acknowledge receipt of the criteria and obligations of a board member and attest that, to the best of my knowledge, I can meet such criteria and obligations at this time.

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*Signature of Candidate Date*

*These forms will be sent to all NAFER Full members. Please limit responses to two pages.  
Please return forms to Jennifer Brinkley at naferstaff@nafer.org.*