*The member whose name is listed in the attached cover letter is seeking a position on the Region 16 Regional Management Team. Please complete this form to the best of your knowledge. Information provided will remain confidential.*

|  |  |
| --- | --- |
|  | **PLEASE LIST YOUR ANSWERS IN THIS COLUMN:** |
| Potential nominee’s name: |  |
| Please indicate how well and in what context you know the applicant. |  |
| What strengths would she bring to the organization as a member of the Regional Management Team? |  |
| The need to observe confidentiality is extremely important for members of the Regional Management Team as they deal with sensitive topics, including discussion of a member’s actions or behavior. How would you rate her in this area? |  |
| It is considered essential that members of the Regional Management Team possess the following attributes/characteristics.  In the *right-hand column:*   * Please rate the applicant in each area on a scale of 1 to 5, with 5 being the highest rating. * Enter a “U” if you are unable to rate the applicant in any area. * Then, write brief explanatory comments to help the Nominating Committee understand your rationale for your ratings. | |
| Leadership: |  |
| Please add your explanatory comments here: |  |
| Vision: |  |
| Please add your explanatory comments here: |  |
| Integrity: |  |
| Please add your explanatory comments here: |  |
| Dependability/Follow-Through: |  |
| Please add your explanatory comments here: |  |
| Ability to Delegate: |  |
| Please add your explanatory comments here: |  |
| Intelligence: |  |
| Please add your explanatory comments here: |  |

|  |  |  |  |
| --- | --- | --- | --- |
|  | | **PLEASE LIST YOUR ANSWERS IN THIS COLUMN:** | |
| Flexibility: | |  | |
| Please add your explanatory comments here: | |  | |
| Objectivity: | |  | |
| Please add your explanatory comments here: | |  | |
| Computer Skills: | |  | |
| Please add your explanatory comments here: | |  | |
| Team Player/Effective Collaboration: | |  | |
| Please add your explanatory comments here: | |  | |
| What is the most important thing you would like the Nominating Committee to know about this applicant? | |  | |
| Appraiser name: | |  | |
| Email: | |  | |
| Phone: | |  | |

***NOTES:***

* Email this form to the Region 16 Nominating Chair.
* If an applicant’s appraisals/references are not received by the deadline, the acceptance of her RMT application may be in jeopardy.
* This form is not shared with the applicant and is kept under strict confidence.