

GWRRA INDIVIDUAL OF THE YEAR RESUME

(Type or Print Legibly)

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CANDIDATES INFORMATION

(This page may be updated as candidates move through the various levels –

Name: _____

Chapter Designation: _____ District: _____ Region: _____

Address: _____

City, State, Zip: _____

Telephone: _____ E-Mail Address: _____

GWRRA Member Number: _____ Exp. Date _____ Join Date: _____

Full Member _____ Associate Member _____

Note: This page may be used to forward information to the District for Individuals who choose not to participate beyond the Chapter Level. If that is the case, please indicate such below by initialing:

_____ I have been selected as the Chapter Individual of the Year but do not wish to participate at the District level.

**Attach a
PHOTOGRAPH and a
copy of your
MEMBERSHIP CARD**

**May attach on a separate page on
the back of the Resume**

AGREEMENTS AND CERTIFICATIONS

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(This page may be updated as candidates move through the various levels – District/Region.)

PART I – To be completed and signed by the candidate and to remain with the resume as it passes through appropriate levels.

1. I have been named Chapter Individual of the Year for the current year (or the immediate-past year) and wish to participate in the selection process for the District Individual of the Year.
2. If selected as District Individual of the Year, I agree to attend the Regional event and participate in the Regional selection process. Please check one: Yes or No
3. I agree to give GWRRA full publicity and cooperation if selected as Individual of the Year at any level (District or Region) of the program. Please check one: Yes or No
4. I agree that the information contained in this resume is accurate to the best of my knowledge.

Typed or printed name of candidate: _____

Signed by candidate: _____ Date _____

PART II

- 1) To be completed and signed by the candidates Chapter or Assistant Chapter Director.

I certify that the above named individual is a participant of Chapter _____
(Include Letter Designation, City, District)

and has been named Individual of the Year for _____
(month/year to month/year)

Signed: _____ Position: _____ Date: _____

- 2) If selected as District Individual of the Year, to be completed and signed by the candidates District or Assistant District Director, for submission to Region.

I certify that the above named individual has been selected _____
(Name of District)

District Individual of the Year for the period of _____
(month/year to month/year)

Signed: _____ Position: _____ Date: _____

NOMINATOR'S COMMENTS

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(This page, the original nominator's comments, remains with the resume as the candidate moves through the various levels. It is to be completed by the Chapter Director or Assistant Chapter Director when the Individual makes the decision to commit and participate in the District Individual of the Year Selection.)

Name of Nominator: _____

Position: _____

Chapter Name (Include Designation/City/District): _____

Comments:

SIGNATURE: _____

DATE: _____

RESUME NARRATIVE

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(Pages 4 and 5 are updated and signed as the candidate moves through the various levels.)

1. Brief Personal Background (e.g. family, work, motorcycling history, etc.)

2. GWRRA Participation and Involvement (e.g. positions held, rallies and activities attended – list chronologically). Note: Only list activities encompassing the preceding five (5) years of Membership.

3. Membership Enhancement Involvement (e.g. recruiting efforts, member retention activities, public relations activities, promotion of GWRRA outside the organization, etc. in the preceding 5 years.)
_____ Members Recruited

RESUME NARRATIVE

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(Pages 4 and 5 are updated and signed as the candidate moves through the various levels.)

4. Rider Education (please identify your Rider Education Level and then list any other relative Rider Education involvement, (e.g. courses/seminars taken or presented – title & year, positions held, etc.)

_____ Rider Ed Level

5. Leadership Training Seminars (please list the number of seminars taken and then list the dates and titles of the seminars taken in the preceding 5 years.)

_____ LTP Seminars taken

6. Why I want to be the District/Region Individual of the Year:

SIGNATURE: _____

DATE: _____