



APPLICATION for NOMINATION

Name (Print) _____

Address _____ City _____ Zip _____

Neighborhood/Development Name _____ McLean area resident (# yrs) __

Phone (H) _____ Phone (W) _____ Phone (C) _____ Circle your primary contact #

E-Mail _____ Other specify) _____

Are you currently: MCA Officer * _____ MCA Director _____

Are you applying for: MCA Officer * _____ MCA Director _____ Years - check one (1)___ (2)___

***Specify: President, 1st VP, 2nd VP, Treasurer, Recording Secretary, Corresponding Secretary.**

If you are applying for MCA Director please specify which type:

___ I am being nominated for a **Neighborhood Representative** seat
(Must complete the NEIGHBORHOOD REPRESENTATIVE section below)

___ I am nominating myself for an **At-Large** seat

NEIGHBORHOOD REPRESENTATIVE (To be completed by the **President** of your association) **Limited to one nomination.**

Name of Association _____

Number of homes _____ Was a meeting in the last year attended by 15 or more persons? _____

Designated Alternate _____

Phone (H) _____ Phone (W) _____ E-Mail _____

President's Signature _____ **Print name** _____

Address _____ City _____ Zip _____

Phone (H) _____ Phone (W) _____ E-Mail _____

MCA/MCF EXPERIENCE (List current or past activity, committee service, etc., and approximate dates)

OTHER APPLICABLE EXPERIENCE (Vocational, Educational, Philanthropic, Civic, Professional, etc., and approximate dates) **Please do not send resumes.**

MCA COMMITTEE PREFERENCE (Select at least one standing committee that you will participate in. Also, please indicate if you are interested in serving as chair, co-chair or vice-chair of a committee; vice-chairs serve in the absence of the chair.)

Planning & Zoning _____ Budget & Taxation _____ Membership _____ Transportation _____
Environment/Parks & Recreation _____ Education & Youth _____

Applicants/nominees for MCA positions agree by signing this form that they will attend all scheduled MCA meetings, unless granted an excused absence, and actively participate on at least one committee, most of which meet monthly. The applicant/nominee certifies that he/she is a current member in good standing of the MCA and currently resides in the MCA-defined area, designated as the area bounded by the Potomac River, the Arlington County line, the Falls Church City line, Route 7, the Dulles Access Road to Difficult Run and along Difficult Run to the Potomac River. In applying for an MCA Board of Directors' position, the applicant/nominee agrees to abide by the Bylaws and Policies/Procedures of the organization. (The documents will be provided upon request, prior to application signature).

SIGNATURE: _____ **DATE:** _____

Please send your application for the MCA Board to:

The McLean Citizens Association, PO Box 273, McLean, VA 22101-0273.

Applications must be postmarked no later than March 12, 2017.