



Application for Director Candidate

Name: _____ Firm: _____

Address: _____

Business Phone: _____ Cell Phone: _____

E-Mail Address: _____

Number of Years in Real Estate: _____ Position with Firm: _____

Primary Board Affiliation: _____

Real Estate Specialty (check all that apply):

- | | | | | |
|--------------------------------------|-------------------------------------|-------------------------------------|---|-------------------------------------|
| <input type="checkbox"/> Residential | <input type="checkbox"/> Commercial | <input type="checkbox"/> Farm/Ranch | <input type="checkbox"/> Property Mgmt. | <input type="checkbox"/> Appraisal |
| <input type="checkbox"/> Auction | <input type="checkbox"/> New Homes | <input type="checkbox"/> Land | <input type="checkbox"/> Relocation | <input type="checkbox"/> Investment |

Other: _____

Position in Firm:

- | | | |
|--------------------------------------|---|--|
| <input type="checkbox"/> Assistant | <input type="checkbox"/> Associate Broker | <input type="checkbox"/> Branch Broker |
| <input type="checkbox"/> Salesperson | <input type="checkbox"/> Managing Broker | <input type="checkbox"/> Broker Owner |

Other: _____

Real Estate Designations and Certifications Earned (check all that apply):

- | | | | | |
|-------------------------------|--------------------------------|--------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> ABR | <input type="checkbox"/> CIPS | <input type="checkbox"/> e-PRO | <input type="checkbox"/> RAA | <input type="checkbox"/> SRES |
| <input type="checkbox"/> AHWD | <input type="checkbox"/> CNE | <input type="checkbox"/> GAA | <input type="checkbox"/> RENE | <input type="checkbox"/> SRS |
| <input type="checkbox"/> ALC | <input type="checkbox"/> CPM | <input type="checkbox"/> GREEN | <input type="checkbox"/> RRC | |
| <input type="checkbox"/> BPOR | <input type="checkbox"/> CRB | <input type="checkbox"/> GRI | <input type="checkbox"/> RSPS | |
| <input type="checkbox"/> C2EX | <input type="checkbox"/> CRE | <input type="checkbox"/> MRP | <input type="checkbox"/> SFF | |
| <input type="checkbox"/> CCIM | <input type="checkbox"/> CRETS | <input type="checkbox"/> PMN | <input type="checkbox"/> SIOR | |

Other: _____

Committee Service or Experience at RSCK, KAR or NAR:

(Committee Member, Committee Chairman, Director, etc.) Attach additional sheets if necessary.

List any other leadership, committee service, or activities in which you have been involved:

(Please include community, civic, religious, political, social, athletic, and other activities.)

Military Service (Branch & Number of Years): _____

Why do you wish to serve as a Director of the REALTORS® of South Central Kansas?

What do you see as the primary purpose of this Association?

What goals and objectives would you like to see pursued by this Association over the next three years?

Will you be able to devote the time necessary to attend meetings and carry out the duties and responsibilities required of a Director of the REALTORS® of South Central Kansas?

By my signature below I certify I am a member in good standing of the REALTORS® of South Central Kansas; acknowledge I have read the Director Job description and agree to fulfill the specified duties and responsibilities to the best of my ability if nominated and elected.

Print Name: _____

Applicant Signature: _____ **Date:** _____

Broker Print Name: _____

Broker Signature: _____ **Date:** _____

Please attach:

- Digital headshot photo
- Additional information you wish to be considered.

Applications should be submitted to Brooke Sattler, Events & Engagement Specialist

MAIL: REALTORS® of South Central Kansas - 170 W. Dewey - Wichita, KS 67202

EMAIL: brooke@sckrealtors.com

**Deadline for submission is
June 30, 2026, by 5:00 pm**