MASMS is Accepting Nominations for the 2020-2021
State Vice President Position

Members of the MASMS Executive Board provide leadership, have a shared vision, a sense of mission and are responsible for the health and growth of MASMS.

This position is a four (4) year commitment that rotates through the following positions:
- Year One | Vice President
- Year Two | President Elect
- Year Three | President
- Year Four | Past President

Nominees must be employed by a school district and be a current active MASMS educational member. Considerations include:
- Commitment to MASMS
- Leadership Ability
- Appreciation for the Respective Roles on the Board
- Ability and Willingness to Serve (disclosed their intent to their employer to serve on the MASMS Executive Board as well as understand the time commitment necessary to fulfill this role).

Duties of each position within this commitment:

**Vice President** | Shall be responsible for planning the educational programs at the State professional growth seminars; perform such duties as the Association President may designate; in the absence of the President and the President Elect, preside at meetings and assume all other necessary duties.

**President Elect** | Shall Chair the State Conference Committee; be an ex officio member of all standing and special committees; responsible for co-chairing the planning committee for the State Meetings; in the absence of the President, preside at all meetings and assume all necessary duties.

**The President** | Shall be the Executive Officer of the State Association; preside over meetings of the State Association; prepare the agenda for the State business meetings; sign all necessary documents and other instruments of the Association authorized by the Executive Council; represent or designate an Association Representative to attend necessary non-Association functions; have the authority to contact a lawyer or CPA as needed; be an ex officio member of all standing and special committees; have the authority to hire an Executive Administrator with the authorization of the Executive Council.

**Past President** | Shall provide support and leadership as requested.

*Note: All positions have the support of the Executive Administrator who helps secure locations, speakers, plans details of events and any other support requested and/or required.*

Nomination and Election Timeline
- Nomination forms will be emailed to membership and posted on the MASMS website no later than June 1st of each year.
- Completed forms are due back to the MASMS office no later than August 15th of each year.
- Nominations will not be accepted at the Annual MASMS Conference.
- Ballots will be distributed at the Annual MASMS Conference.
- Voting will be completed at the annual business meeting at the Annual MASMS Conference.
- Job duties start at the close of the Annual MASMS Conference.

Nomination Process
- To nominate yourself or another MASMS member please complete and follow the instructions on the attached nomination form.
Nomination Form for 2020-2021 MASMS State Vice President Position

Nominee’s Name: _____________________________________________________________________

Nominee’s Title: ______________________________________________________________________

School District: ______________________________________________________________________

Address: _____________________________________________________________________________

City: ________________________________________________________________________________ State: _______ Zip: __________________

Phone Number: ___________________________ Cell Phone Number: ____________________________

Email: __________________________________ Signature: _________________________________

- Email the MASMS office (ruth@masms.org) a digital photo of the candidate.
- Attach to this form a short biography (not to exceed 150 words) of the candidate. Information should include brief career history such as education received, years in profession, past service to MASMS and other ways the candidate has contributed to the profession.

Why do you want this position?
_________________________________________________________________________________________
_________________________________________________________________________________________
_________________________________________________________________________________________
_________________________________________________________________________________________
_________________________________________________________________________________________
_________________________________________________________________________________________

If other than self, contact information for person making the nomination.

Name: _______________________________________________________________________________

Phone Number: ___________________________ Email: ___________________________________

Mail or email nomination form and requested items to:

MASMS
600 4th Street North
Cold Spring, Minnesota  56320
Email: ruth@masms.org

For additional information and/or questions please just contact the MASMS office.

(320) 685-4585
ruth@masms.org