



# National Association of Insurance & Financial Advisors Illinois

## *Distinguished Service Award & YAT Member of the Year*

### **Distinguished Service Award & YAT Member of the Year**

#### Purpose & Presentation

“To recognize individuals who have given meritorious service to the insurance and financial services industry, the agency system, and the community in ways that enhance the image of the agent. These individuals have provided exceptional service to NAIFA.”

These awards will be presented at the NAIFA Illinois Annual Leadership Conference and Business Meeting.

#### Criteria for Selection of Distinguished Service Award

- ◆ Minimum of 15 years as a NAIFA member and a current member
- ◆ Previous leadership role at the state or local level as officer or director
- ◆ Endorsement of the current local board, including a written description how the candidate has positively affected their local
- ◆ APIC and IFAPAC involvement, membership recruitment and leadership involvement and development

#### Criteria for Selection of YAT Member of the Year

- ◆ Must be a YAT, under the age of 40 or less than 5 years in the business and a current member
- ◆ Currently serving or past service at the state or local level as officer or director
- ◆ Endorsement of the current local board, including a written description how the candidate has positively affected their local
- ◆ APIC and IFAPAC involvement, membership recruitment and leadership involvement and development

#### Selection Committee

Nominations are reviewed and the award recipient determined by a committee consisting of the three Local National Committeemen and the past three prior recipients of the award.

**Award nominations deadline is March 9, 2018.**

Send the completed application and supporting documents to NAIFA Illinois,  
PO Box 13365, Springfield, IL 62791-1336.

Please fill in completely - Must Be Typed

\_\_\_\_\_ **Distinguished Service Award**

\_\_\_\_\_ **YAT Member of the Year**

**Name of Nominator**

I have prepared all supporting documents provided in this application and consider it accurate and complete to the best of my knowledge.

Your Name \_\_\_\_\_

Company \_\_\_\_\_

Address, City, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

**Candidate Information**

Name \_\_\_\_\_

Local Association \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Office Phone \_\_\_\_\_ Fax Number \_\_\_\_\_

E-Mail \_\_\_\_\_

Name of Company/Agency \_\_\_\_\_

Position or Title \_\_\_\_\_

Name of Primary Carrier (if different from above) \_\_\_\_\_

Highest diplomas received and from where \_\_\_\_\_

Please list all professional designations and year received \_\_\_\_\_

\_\_\_\_\_

Is the candidate a member of IFAPAC \_\_\_\_\_? Please indicate at which annual level.

- Investor (\$50-\$99)       Century (\$100-\$199)       Ambassador (\$200-\$299)
- Statesman (\$300-\$499)       Envoy (\$500-\$999)       Diplomat (\$1,000-\$2,499)
- Emissary (\$2,500-\$4,999)       Capitol (\$5,000)

Is the candidate an MDRT member?    \_\_\_\_\_ Qualifying    \_\_\_\_\_ Life    \_\_\_\_\_ Life & Qualifying

NQA? Number of years \_\_\_\_\_      Member of GAMA?      Position \_\_\_\_\_

NSAA? Number of years \_\_\_\_\_      AALU?      Position \_\_\_\_\_

HQA? Number of years \_\_\_\_\_      SFSP?      Position \_\_\_\_\_

Please give a brief history of the candidate's insurance career - example: years in the business, previous company affiliations, etc. Please attach a separate sheet if you need additional space.

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Office and committee chairmanships held in your local association:

currently \_\_\_\_\_

formerly \_\_\_\_\_

Offices and committee assignments held in NAIFA Illinois:

currently \_\_\_\_\_

formerly \_\_\_\_\_

Offices and committee assignments held in NAIFA:

currently \_\_\_\_\_

formerly \_\_\_\_\_

Political Involvement (APIC Contacts)

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**Essay** - Describe in specific detail the qualifications and contributions of your candidate which, in your opinion, fulfill the stated purpose of this award.

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**Submission of Nomination & Supporting Information**

Nominations are to be submitted by an individual member, or local association, on behalf of another individual member.

Nominations must be **received** at NAIFA Illinois **no later than the March 9, 2018, deadline.**

Only nominations submitted using this application will be accepted via USPS, fax or e-mail.

When submitting a nomination, be sure to include an essay explaining why the individual you are nominating will make an excellent recipient of this award. **DO NOT** assume the Selection Committee will know your nominee.

Outside documentation, such as newspaper clippings or magazine articles are always helpful.

Nominations are kept on file for three years and will be reconsidered each of those years.

NAIFA Illinois will notify each nominator when their candidate’s nomination is about to expire and will provide the nominator an opportunity to reapply.

Send the completed application and supporting documents to NAIFA Illinois, PO Box 13365, Springfield, IL 62791-1336. You can also e-mail it to [sara@naifa-il.com](mailto:sara@naifa-il.com) or fax it to 217-529-0977.