

NAIFA-OREGON

APPLICATION FOR THE 2016 TONY KONEN MEMORIAL AWARD TO OUTSTANDING LOCAL ASSOCIATION PRESIDENTS

NAME: _____

LOCAL ASSOCIATION: _____

*This form must be completed and postmarked no later than March 8, 2017
Late applications will not be considered. Supporting data may be submitted.*

TO COMPLETE APPLICATION, PLEASE BE SURE TO SIGN LAST PAGE.

GRADING

You will be graded on total points from the five areas listed below. You are judged on your personal participation as well as on your ability to lead others in participating. Criteria for judging are as follows:

- | | | |
|----|-----------------------------------|-----------|
| 1. | Association Leadership | 50 |
| 2. | Industry & Legislation | 50 |
| 3. | Community Service | 50 |
| 4. | Achievements | 20 |

170 TOTAL POSSIBLE POINTS

Return completed applications by March 8, 2017 (postmarked) to:
Don Nau – Attn: Tony Konen Award
818 S. 69th St,
Springfield, Or 97478
Or email to naud1@comcast.net
Questions? Call Don at 541-747-1458

I. ASSOCIATION LEADERSHIP

A. Membership

- 1) Your local's membership on 6/30/2016: _____ (leave blank; NAIFA-Oregon will fill in)
- 2) Your local's membership as of 2/1/2017: _____

B. Meetings

- 1) How many monthly meetings does your association have each association year? _____
 - 2) What percent of your members attend these meetings? _____
 - 3) How far ahead are your programs and speakers scheduled? _____
 - 4) How far ahead do you notify your members of the next meetings? _____
(Include a sample of your meeting notice)
 - 5) Do you have an active Attendance Committee?
____yes ____no If yes, describe how it works: _____
-

C. Leadership activities

- 1) Did you attend the 2015 NAIFA-OR Convention (Skamania Lodge)? ____yes ____no
- 2) Did you attend the 2015 NAIFA Convention (Las Vegas, NV)? ____yes ____no
- 4) What previous state or national conventions did you attend? _____
- 5) Did your National Committeeperson or an alternate attend the 2016 NAIFA Convention?
____yes ____no
- 6) How many Teleconference Board Meetings were you on? _____
- 7) How many local board meetings did you hold this past year? _____

1. Association Leadership (cont.)

- 8) Do you present a financial statement to your board and/or membership regularly?
____yes ____no (Please include a sample.)
- 9) Do you have a newsletter/email that goes to your members? ____yes ____no
If so, how many were sent this year? _____ (Please include two issues.)
- 10) Did you prepare a proposed budget for your year and present it to your board and/or membership?
____yes ____no (Please include a copy of it if you did.)

II. INDUSTRY LEADERSHIP

- 1) List the educational programs your local sponsored or participated in this year?

► Were non-members allowed to participate? ____yes ____no

- 2) Have you personally either taken or taught any of the following:

	<u>Taken</u>	<u>Taught</u>
LUTC Class	<input type="checkbox"/>	<input type="checkbox"/>
CLU Class	<input type="checkbox"/>	<input type="checkbox"/>
A.C.E. Class	<input type="checkbox"/>	<input type="checkbox"/>

Explain: _____

Other: _____

Explain: _____

- 3) Did or does your association plan to apply for the 2016-17 NAIFA Jack E Bobo Agency Achievement Award?

____yes ____no If yes, explain: _____

II. Industry Leadership (cont'd)

4) Did your association put on any kind of consumer education project this past year?
___yes ___no If yes, explain: _____

5) Did your association conduct any consumer education activity with the media?
___yes ___no If yes, explain: _____

6) Did you offer assistance to any locals other than your own this year?
___yes ___no If yes, explain: _____

7) Has your local done any programs or projects involving health insurance this year?
___yes ___no If yes, explain: _____

8) Are you a member of NAIFAPAC?
___yes ___no If yes, what level? _____

9) . What NAIFAPAC activities and/or contributions has your local association done this year?

10) Does your association schedule at least one politically-oriented program per year?
___yes ___no If yes, explain: _____

II. Industry Leadership (cont'd)

11) a. Is your local organized to respond to a state/national request for action on a legislative issue?
____yes ____no If yes, explain: _____

b. Give one or more examples of what you have done in response to a need for legislative action:

12) The per capita contribution to IFAPAC by your individual members

as of December 31, 2016: _____ *(Leave blank; NAIFA-Oregon will fill in)*

compared to last year: _____ *(Leave blank; NAIFA-Oregon will fill in)*

13) Explain any projects you or your association were involved in this past year with insurance related groups outside of NAIFA-Oregon: _____

14) What designations have you earned?

- LUTCF
- CLU
- ChFC
- Other: _____

III. COMMUNITY SERVICE

1) List the Community Service projects that your association sponsored or participated in this year:

2) What percent of your members participated in these Community Service projects?

_____ %

III. Community Service (cont'd)

- 3) Did you provide news releases or make other contacts with the media on these projects?
___yes ___no If yes, enclose sample or explain: _____

- 4) Have you, as an individual or as a representative or your association, been involved in other groups (such as church, civic clubs, municipal-county-state advisory boards or offices, Boy Scouts, YMCA, etc.)?
___yes ___no If yes, explain: _____

IV. ACHIEVEMENTS AND AWARDS

- 1) Did you encourage your association members (through your newsletter, meeting announcements, and others means) to participate in NAIFA Industry Awards (such as NQA, NSAA, Multi-Lines Sales Award, etc.)?
___yes ___no

- 2) Does your association hold an annual award ceremony / program?
___yes ___no

- 3) As an individual, have you received any special recognition this past year, whether associated with insurance or outside the industry?
___yes ___no If yes, explain: _____

- 4) Did or will your association submit entries this year to NAIFA-Oregon for the various Agents of the Year Awards *(the deadline is March 8, 2017)*
___yes ___no

The information in this report is accurate to the best of my knowledge.

NAME: _____

LOCAL ASSOCIATION: _____

SIGNATURE: _____ **DATE:** _____