Application for Region 1 Board position

**Treasurer - Application for Election at Assembly, 2019**

Please type or print in black ink or complete online.

Return application by August 1, 2019 to: [nominations@oaregion1.org](mailto:nominations@oaregion1.org)

**Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Phone:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Cell Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date Joined OA:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date Continuous Abstinence Began**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**BOARD QUALIFICATIONS:**

Listed in Region Assembly of Overeaters Anonymous Bylaws Article V, Section 3.

Be a member of OA within the Region’s geographic boundaries.

Have been abstaining from compulsive overeating for a least one year.

Have two years of service above the group level, if a member of an intergroup

Have been World Service Delegate, if possible.

Be working the Twelve Step Program to the best of his ability and have taken the fifth step.

Each Region One officer is expected to adhere to all bylaws and policies adopted by Region One. They shall keep intact all papers and materials received upon and during their term of office, to be turned over to their successor upon leaving office. The first duty of all officers shall be to attend all Region One meetings unless excused.

**JOB DESCRIPTION:** Treasurer

A. Submits financial statements prior to each Board meeting and Assembly.

B. Submits preliminary budget for discussion at the Board meeting immediately preceding Assembly.

C. Submits budget to Assembly for approval.

D. Maintains up-to-date financial information including balancing checking accounts monthly.

E. Shall perform all other duties as prescribed in the Region One Job Description Policies.

**REGION ONE SERVICE RESPONSIBILITY PLEDGE**

I commit to physical, emotional and spiritual recovery, one day at a time, while serving on the Region One Board. As a board member, I pledge to provide support and encouragement to the recovery of my fellow board members, and to talk honestly about my perceptions of relapse or denial with kindness and love.

**NAME:** **DATE:**

**1. SUMMARY OF OA SERVICE**

**2. WHAT BUSINESS, PROFESSIONAL OR OTHER EXPERIENCE & SKILLS DO YOU BRING TO THE BOARD?**

**3**. **WHY DO YOU WANT TO SERVE IN THIS BOARD POSITION**?

**4**. **GIVE A BRIEF ACCOUNT OF YOUR OA STORY**

As a Region One Board nominee, my signature affirms adherence to Region One Assembly of Overeaters Anonymous Bylaws, Article V, Section 3.

NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Use additional sheet if necessary)