

## Candidate Questionnaire 2024

(To be filled out by a prospective candidate for a DAV Department of Tennessee Elected Office)

Name of Candidate: \_\_\_\_\_

Office Running for: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

email: \_\_\_\_\_

Chapter Number: \_\_\_\_\_ DAV Member Since: \_\_\_\_\_

Branch and Period of Military Service: \_\_\_\_\_

Is Candidate a ( ) Service-Connected Disabled Veteran    Did Your Chapter Support You? ( ) Yes ( ) No  
( ) Military Disabled Retiree

Was Discharge Honorable \_\_\_\_\_ If not, what type \_\_\_\_\_

Describe educational background and/or vocational or business involvement: (use additional pages as needed)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List chapter, department and national offices held: (also any other DAV office of importance)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Statement by candidate on DAV aspirations, accomplishments, personal talents, general or unique qualifications, including ability and willingness to serve (use additional pages as needed)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- All currently serving Elected Positions **MUST** also fill out and submit this form as well as be interviewed by the committee at convention.
- Candidates are expected to give a 3-10 minute presentation to the Committee following which an interview session will begin (attach letters of support)
- Gifts to members of the Nominating Committee are prohibited
- If you are running for a position on the Executive Committee, it is recommended that you submit with this application a current TBI Background Report which can be found at [www.tn.gov/tbi](http://www.tn.gov/tbi)

MAIL TO: **DAV HEADQUARTERS**  
**P.O. BOX 296**  
**LAWRENCEBURG, TN 38464**