**NOMINATION FORM: MIAMI CHAPTER OF**

**A dark room

Description automatically generated**

**Please *fill in all fields* and answer all questions. \*\*NOTE: Each nomination must be supported by at least TWO members. Please have ONE additional member submit a nomination form in support of this nomination.\*\***

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| **Member Name:** |  |
| **Name of Nominee:** |  |
| **Nominee’s Firm Name:** |  |
| **Nominee’s address and contact information:**  **(Please include telephone number and email)** |  |
| **How long have you known the Nominee?:** |  |
| **Nominee’s Education:** |  |
| **How long has the nominee been in the**  **practice of law and do they meet ABOTA's**  **qualifications as prescribed in Article III (Membership):** |  |
| **What other organizations does**  **the nominee belong to?**  **(Please indicate what leadership posts**  **the person has held, if known):** |  |
| **Do you believe the nominee will be an**  **active member of ABOTA?**  **Yes or No** |  |
| **Do you believe this candidate would support the**  **ABOTA Resolutions and Mission?**  **Yes or No** |  |
| **Do you believe this candidate would be an active participant in the Court's Guardian Ad Litem program?**  **Yes or No** |  |
| **On what do you base your beliefs (have you participated in other organizations with this person, do they have a reputation for active civic and volunteer involvement, have you had cases with this person, etc.)?** | |
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| **In what kind of activities (special skills, interests, experience) do you believe the nominee would be most active?** |
|  |
| **What is your opinion of the nominee's professional reputation in the legal community (please indicate any significant honors, awards, or recognition the individual has received or significant trials the individual has had a lead role in)?** |
|  |
| **List other ABOTA member(s) who would support this nomination:** |
|  |

**Please return this form to the attention of:**

**Michelle Samuelson,** [**michelle@jeffdavislaw.com**](mailto:michelle@jeffdavislaw.com)

**By mail to: ABOTA Miami, 75 Valencia Avenue, Suite 100, Coral Gables, Florida 33134**

**\*\*\*\*USE ADDITIONAL SPACE BELOW TO COMPLETE ANSWERS\*\*\*\***