To apply for membership in the ACA WSO Nominating Committee:

1. Review the qualifications (in this document)
2. Familiarize yourself with ACA WSO Operating Policy and Procedures Manual OPPM), especially Section III, WSO Board of Trustees, and the ACA WSO By-laws. Access these from the lower right-hand menu on <https://acawso.org/>
3. Complete and sign the application (in this document)
4. Provide references using the form (in this document)
5. Sign the Commitment to Service (in this document)
6. Read the ACA WSO Conflict of Interest Policy (Access from the link on [https://acawso.org/category/nominating-committee/](https://acawso.org/category/nominating-committee/%20)). Complete the last page of that document (Acknowledgement/Disclosure Form) and submit it with your application

**Send your completed application to** [**chairnomcom@acawso.org**](mailto:chairnomcom@acawso.org)

**Part I. Qualifications**

A Nominating Committee Member must have the following qualifications:

1. Ability to protect confidential information revealed during the Committee evaluation process. (Confidentiality)
2. History of both completing work independently and working well within a group.
3. Familiarity with the ACA service network.
4. Strong organization and communication skills.
5. Ability to donate substantial time to attend meetings and to fulfill the additional commitments of Nominating Committee membership.
6. A working knowledge of the Twelve Steps, Traditions, and Concepts of Service.
7. Continuous attendance at ACA meetings for at least the previous six years, except that one member may have 2-3 years of attendance. Having one newer member will ensure that the needs of relative newcomers to ACA will be considered by the Committee.
8. One year or more of combined service for an ACA Intergroup, region, or WSO committee, with at least six months of active participation on a WSO Committee.
9. Attendance on at least six WSO teleconference calls in the previous twelve months.
10. May not hold a high-level volunteer position in another 12-Step fellowship.

**Part II. Application**

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

ACA Group/Intergroup #/Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Describe how you meet each of the these qualifications for Nomination Committee membership. Add pages as necessary.

1. What is your experience in protecting confidential information ?
2. Provide examples of your experience of completing work independently and working well within a group.
3. How familiar are you with the ACA service network and how did you get familiar with it?
4. Provide examples of your organization and communication skills.
5. Are you able to donate substantial time to attend meetings and to fulfill the additional commitments of Nominating Committee membership? What are your limitations, e.g., time, travel, communications, technology?
6. What is your level of knowledge of the ACA Twelve Steps, Traditions, and Concepts of Service?
7. Since what date have you been in continuous attendance at ACA: \_\_\_\_\_\_\_\_\_\_\_\_\_.
8. Describe your service work and amount of time at each level: ACA Intergroup, region, or WSO committee.
9. Since what date have you attendance on WSO teleconference calls since \_\_\_\_\_\_\_\_\_\_\_\_\_; at what frequency? \_\_monthly; \_\_ quarterly; other (describe): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
10. What positions do you hold in another 12-step fellowship, other than the group level? Describe how much longer you will hold this position and estimate the time you devote on a monthly basis.

Briefly state why you want to be on the Nominating Committee and any special experience, skills or qualities that will influence your service.

I agree to keep information presented to Committee confidential, practice humility, integrity, trustworthiness and practice open communication among Nominating Committee members.

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Signature Printed Name Date

**Part III. References**

Please list **at least three** ACA members we can speak with about your qualifying experiences. Be sure to let them know we will be contacting them and asking about you. Also, be sure to let them know they will not be violating your anonymity by answering our questions!

1. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_; Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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2. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_; Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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3. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_; Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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4. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_; Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

How they know you \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Part IV. Commitment to Service**

The following is your commitment to service, the same as signed by Trustees in compliance with the WSO OPPM, Section III.F.

**The Suggested Commitment to Service**

I perform service so that my program will be available for myself, and through those efforts, others may benefit. I will perform service and practice my recovery by:

1. Affirming that the true power of our program rests in the membership of the meetings and is expressed through our Higher Power and through group conscience.
2. Confirming that our process is one of inclusion and not exclusion; showing special sensitivity to the viewpoint of the minority in the process of formulating the group conscience so that any decision is reflective of the spirit of the group and not merely the vote of the majority.
3. Placing principles before personalities.
4. Keeping myself fit for service by working my recovery as a member of the program.
5. Striving to facilitate the sharing of experience , strength, and hope at all levels: meetings , Intergroups, Regional committees, service boards, and World Services.
6. Accepting the different forms and levels of service and allowing those around me to each function according to their own abilities.
7. Remaining willing to forgive myself and others for not performing perfectly.
8. Being willing to surrender the position in which I serve in the interest of unity and to provide the opportunity for others to serve; to avoid problems of money, property, and prestige; and to avoid losing my own recovery through the use of service to act out my old behavior, especially in taking care of others, controlling, rescuing, being a victim, etc.
9. Remembering I am a trusted servant; I do not govern.

I agree to comply with, and be bound by, all terms and provisions of the ACA WSO bylaws as well as the policies and procedures as set forth in the ACA WSO Operating Policies and Procedures Manual and the above Suggested Commitment to Service.

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Signature Printed Name Date