



## II. ADVANCED LEADER

- ▶ Received Competent Leader award

CLUB NO. \_\_\_\_\_ CERTIFICATE NO. (If applicable) \_\_\_\_\_ DATE RECEIVED \_\_\_\_\_

- ▶ Served a complete term\* (July 1 – June 30) as a district officer (District Governor, Lieutenant Governor, Public Relations Officer, Secretary, Treasurer, Division Governor, Area Governor). (Applicants in undistricted clubs need not complete this requirement.)

(\*Term must be completed at the time you submit this application.)

Office held \_\_\_\_\_ District No. \_\_\_\_\_

Date served (fill in years)

July 1, \_\_\_\_\_ through June 30, \_\_\_\_\_

- ▶ Completed the High Performance Leadership Program.

Club No. \_\_\_\_\_ Certificate No. \_\_\_\_\_ Date Received \_\_\_\_\_

IF APPLICABLE

- ▶ Served successfully as sponsor\* (up to two allowed) or mentor\*\* (up to two allowed, appointed by the District Governor) of a new club. Name must appear on Application to Organize (Form 5).

(\*Members are successful sponsors when the new club charters and sends World Headquarters a letter verifying that the sponsor performed his/her duties. World Headquarters must receive this letter no later than 90 days after the club charter date.)

(\*\*Members are successful mentors after they have worked with the new club for at least six months following its charter and the new club sends World Headquarters a letter verifying that the mentor performed his/her duties for those six months.)

New Club Name \_\_\_\_\_ New Club No. \_\_\_\_\_ Date Chartered \_\_\_\_\_

OR

Served successfully as a club coach or club specialist (Up to two allowed per club. Coaches and specialists must be appointed by the District Governor and World Headquarters must have the appointment notice on file.)

Club Name \_\_\_\_\_ Club No. \_\_\_\_\_ Appointment Date \_\_\_\_\_

## III. DISTINGUISHED TOASTMASTER

- ▶ Received Advanced Toastmaster Gold award

CLUB NO. \_\_\_\_\_ CERTIFICATE NO. (If applicable) \_\_\_\_\_ DATE RECEIVED \_\_\_\_\_

- ▶ Received Advanced Leader award

CLUB NO. \_\_\_\_\_ CERTIFICATE NO. (If applicable) \_\_\_\_\_ DATE RECEIVED \_\_\_\_\_

## CLUB OFFICER VERIFICATION

The Toastmaster whose name appears above has completed all of the requirements for this award.

SIGNATURE \_\_\_\_\_

PRINT NAME \_\_\_\_\_

CLUB OFFICE HELD \_\_\_\_\_

(MEMBERS MAY NOT SIGN THEIR OWN APPLICATION.)

Please send a letter about my award to my employer or supervisor listed below.

(Type or print neatly and do not abbreviate title or company name.)

Name of Employer/Supervisor \_\_\_\_\_ Title \_\_\_\_\_

Address 1 \_\_\_\_\_

Address 2 \_\_\_\_\_

Address 3 \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ ZIP/Postal Code \_\_\_\_\_

Country \_\_\_\_\_ E-mail \_\_\_\_\_



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