



# Medallion Award Application

*Please return completed form to:*

Council of Residential Specialists  
Attn: Colleen McMahon  
430 N. Michigan Ave  
Chicago, IL 60611  
Phone: 800.462.8841  
Fax: 312.994.6442

**ABOUT THE AWARD:**

The Medallion Award is one of the Council's most prestigious honors, recognizing length of membership and outstanding service to the Council.

Name \_\_\_\_\_

Office Name \_\_\_\_\_

Office Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Office Phone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail Address \_\_\_\_\_

**Please complete the form below and submit any required documentation.**

**DEADLINE:**

Applications must be submitted by September 1<sup>st</sup> to be awarded at the Annual Conference. Awards are presented at the Inaugural & Awards Dinner.

**MANDATORY:**

15 years of continuous membership in the Council of Residential Specialists.  
10 years of continuous membership in the state chapter.

**ELECTIVE REQUIREMENTS:**

Must have a total of 5 points.

Points Earned	Points Available	Credit
	1 per year, 2 max	Chapter Officer Must be an officer for at least two years. Position: _____ Year: _____ Position: _____ Year: _____

Points Earned	Points Available	Credit
	1 per year, 1 max	Chapter CRS of the Year. Chapter: _____ Year: _____ Please provide a copy of the plaque or letter from the Chapter.
	1 per year, 2 max	Chair of a Council Committee. Must serve as chair a minimum of two times. Committee: _____ Year: _____ Committee: _____ Year: _____
	1 per year, 1 max	Write an article for the <i>Residential Specialist</i> . Credit will be given to articles written for articles written for <i>Real Estate Business</i> and the <i>RS Insider</i> (prior to 2002) Article: _____ Date: _____
	1 per year, 2 max	Serve at least one complete term as a Director of the Council of Residential Specialists. Term: _____
	.5 per year, 2 max	Member of a Council of Residential Specialists Committee. Minimum of two committees each year. Must attend at least one of the two annual meetings. Committee: _____ Year: _____ Committee: _____ Year: _____ Committee: _____ Year: _____ Committee: _____ Year: _____
	1 per year, 2 max	Serve at least one complete term as a Regional Vice President for the Council of Residential Specialists. Region: _____ Year: _____

**Don't forget:**

Applications are due by **September 1<sup>st</sup>** in order to be reviewed and awarded during the Council's Inaugural & Awards Dinner held during the National Conference.