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**Program Application**

**Instructions**:

The individual nominating someone for this program should complete this form. Upon completion, please return to [info@NBMDA.org](mailto:info@NBMDA.org). Upon receipt, NBMDA will issue an invoice. Participation in the 2024 program is not final until this invoice is paid and confirmation is sent. The cost of the 2024 program is **$3595**.

The deadline to apply for NBMDA’s Emerging Distribution Leaders Program is **April 1, 2024**.

To graduate from the program, each student must participate in and complete each of the four segments of this program: University of Innovative Distribution (UID), NBMDA Master Manager Program, UID In-A-Day and the NBMDA Annual Convention.

# **Nominator Information:**

First Name: *Nominator’s first name*

Last Name: *Nominator’s last name*

Title: *Nominator’s position title*

Company: *Company name*

Address:

*Company’s street address*

*City, State, Zip*

Phone (office): *Office phone number*

Phone (cell): *Cell phone number*

E-Mail: *Work E-mail*

# **Nominee #1 Information:**

First Name: *Nominee’s first name*

Last Name: *Nominee’s last name*

Title: *Nominee’s position title*

Company: *Nominee’s company name*

Address:

*Company street address*

*City/State/Zip*

Phone (office): *Office phone number*

Phone (cell): *Cell phone number*

E-Mail: *Nominee’s work E-mail*

How many years has the nominee been in the industry? *# of years*

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# **Nominee #2 Information:**

First Name: *Nominee’s first name*

Last Name: *Nominee’s last name*

Title: *Nominee’s position title*

Company: *Nominee’s company name*

Address:

*Company street address*

*City/State/Zip*

Phone (office): *Office phone number*

Phone (cell): *Cell phone number*

E-Mail: *Nominee’s work E-mail*

How many years has the nominee been in the industry? *# of years*

# **Nominee #3 Information:**

First Name: *Nominee’s first name*

Last Name: *Nominee’s last name*

Title: *Nominee’s position title*

Company: *Nominee’s company name*

Address:

*Company street address*

*City/State/Zip*

Phone (office): *Office phone number*

Phone (cell): *Cell phone number*

E-Mail: *Nominee’s work E-mail*

How many years has the nominee been in the industry? *# of years*