



# 2018 NOMINATION FORM

**INSTRUCTIONS:** COMPLETE THE APPROPRIATE BOX INDICATING YOUR CANDIDACY SELECTION. **THE COMPLETED FORM MUST BE RECEIVED BY THE CCEA ELECTIONS COMMITTEE (AT THE CCEA OFFICE) NO LATER THAN 1:00 P.M., DECEMBER 11, 2018.** ADDITIONAL NOMINATION FORMS WILL BE ACCEPTED FROM THE FLOOR DURING THE ASSOCIATION REPRESENTATIVE COUNCIL MEETING BEING HELD AT KO KNUDSON MS (2400 Atlantic St, Las Vegas, NV 89104) ON **DECEMBER 12, 2017**, AT WHICH TIME NOMINATIONS WILL BE DECLARED CLOSED. **THIS NOMINATION FORM CANNOT BE ACCEPTED WITHOUT THE CANDIDATE'S SIGNATURE.**

**AS A CANDIDATE FOR THIS RACE, I UNDERSTAND THAT IT IS MY RESPONSIBILITY AND OBLIGATION TO FULLY UNDERSTAND AND COMPLY WITH THE 2018 CCEA STANDING ELECTIONS PROCEDURES AND THAT I FULLY UNDERSTAND THE FUNDING POLICY.**

**NOTE:** There are approximately thirty-seven (37) positions for CCEA Delegates to NEA Representative Assembly.

\*Please print your legal name, and your name as you would like it to appear on the official ballot.

*You may only run for one office in this section.*

## **CCEA NEA Representative Assembly (LOCAL) Delegate**

2-year term (2018-2020)

*Please be notified that I wish to be a candidate for NEA REPRESENTATIVE ASSEMBLY:*

\* Legal Name (Please Print): \_\_\_\_\_

\*Name on Ballot (Please Print): \_\_\_\_\_

Home Address: \_\_\_\_\_

City/ State/Zip: \_\_\_\_\_ Email: \_\_\_\_\_

School Site and Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Signature of Nominee: \_\_\_\_\_ Date: \_\_\_\_\_

Placed in Nomination By: \_\_\_\_\_

First **PRINT THEN SIGN**

Second **PRINT THEN SIGN**

**IMPORTANT:** If you are currently holding a CCEA NEA-RA delegate position and your term is not expiring, the submitted nomination will be voided by the Elections Committee.