**-- SAMPLE --**

**NOMINATION FORM**

**(LOCAL/CLUSTER)**

**(YEAR) IEA R.A. DELEGATE ELECTION**

 The (YEAR) Illinois Education Association Representative Assembly, otherwise known as the IEA R.A., will be held on (DATES). The IEA R.A. will be held at (LOCATION) in (CITY), Illinois. **The election for this** **position will be held on (DATE)**. (See the IEA Fall all member elections mailer for specific election timelines.)

 IEA R.A. delegates will be responsible for approving the IEA budget, establishing a dues amount, modifying the Legislative Platform and Bylaws and conducting other business of the Association.

 A member may either nominate a colleague or themselves for this position by completing and submitting this form. The Elections Committee recommends that should you choose to nominate someone else, please make sure they want to be nominated and ***can attend*** this Assembly. All forms must be sent to the Elections Committee Chairperson, (NAME), (ADDRESS) by (DATE).

**Please complete and return form to:**

**IEA**

**Attn: Elections Committee**

**(ADDRESS)**

**Must be received by: (DATE)**

Nominee's Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nominee's Local: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nominee's Address & Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nominee's Non-School Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_