

NOMINATION FORM FOR I.E.A. OFFICE

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

E-Mail Address: _____

Home Phone: _____ Cell Phone: _____

Signature _____ Date _____

Return form to IEA, P.O. Box 2638, Boise ID 83701 or fax to 208-336-6967.

NOMINATION FORM FOR I.E.A. OFFICE

Name: _____

Office sought:

_____ IEA President*

_____ IEA Vice President*

_____ NEA Director from the IEA*

_____ IEA Representative on the NEA Resolutions Committee*

_____ At Large Member of the IEA Board of Directors*

_____ ESP At Large Member of the IEA Board of Directors*

_____ IEA Regional Representative on the IEA Board of Directors

_____ Retired Member on the IEA Board of Directors

**Closing of nominations for these offices is two (2) months prior to the first day of Delegate Assembly.*

RESUME OF CANDIDATE

Resumes of candidates will be available on the IEA Elections Website. Information not requested on this resume will not be posted on the website.

Please list any (3) offices you have held in the local, region or state education association. Also list the dates that the office(s) was held. *(If more than three are listed, only the first three will be printed.)*

1. _____

2. _____

3. _____

Please list and explain up to three other activities or involvement in your local, region, or state education association. *(If more than three are listed, only the first three will be posted on the website.)*

1. _____

2. _____

3. _____

Signature _____ **Date** _____

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