NOMINATION FORM FOR STATE DELEGATE FROM IDAHO TO NATIONAL EDUCATION ASSOCIATION REPRESENTATIVE ASSEMBLY

The form below is being provided to Idaho Education Association members who desire to serve as a state delegate to the NEA Representative Assembly, (date) ______ in (location) ______.

Name: ________________________________________________________________

Address: ___________________________________________________________________

City: __________________________ State: __________ Zip: __________

E-Mail Address: ___________________________________________________________________

Home Phone: __________________________ Cell Phone: __________________________

Years’ Experience in Education: __________ Grade Level: __________________________

Assignment: ___________________________________________________________________

Local Assn: ___________________________________________________________________

Zone: __________________________ First Time Delegate (circle one): YES NO

ETHNIC GROUP (mark one): □ Amer Indian/Alaska Native □ Black □ Hispanic
□ Caucasian □ Asian □ Native Hawaiian/Pacific Islander □ Multi-Ethnic □ Other
(specify) __________

Signature ____________________________________________________________________ Date ______________

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

Zone Sought: ________________________________________________________

*Closing of nominations for state delegates is ____________________________.

RESUME OF CANDIDATE

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

Please list and explain up to three 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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