Filing Form for Candidate for KEA Office for elections to be held at the 2020 KEA DA

This form should be completed by the candidate and delivered to the Chair of the Compliance/Constitution committee or his/her designee not earlier than October 1, 2019 and not later than 5:00 p.m. eastern on Wednesday, January 15, 2020. Completed forms may be submitted electronically to CCC@kea.org.

Candidates may not begin campaigning until this form is received and acknowledged by the Chair of the CCC. Only this official form will be accepted. Please type or write plainly.

NOMINATION FOR: (CHECK ONE)

________ KEA Ethnic Minority Director at Large (Seat 1) Term begins July 1, 2020 and ends June 30, 2023

________ KEA Ethnic Minority Director at Large (Seat 2) Unexpired term begins on date of election and ends June 30, 2021

________ NEA State Director (Seat 1)* Term begins September 1, 2020 and ends August 31, 2023. All candidates must have been a member of KEA/NEA for two (2) years immediately preceding the election.

PERSONAL: This information will be shared with KEA staff, KEA Board of Directors and District Presidents

Candidate name: ________________________________

Educational position: ________________________________

Place of employment: ________________________________

Home mailing address: ________________________________

Primary personal phone number: ________________________________

Work phone: ________________________________

Personal email address: ________________________________

Work email address: ________________________________

ETHNIC MINORITY DESIGNATION: Ethnic-minority information is required for candidates seeking election to a KEA Ethnic Minority Director at Large seat. For all other candidates, this information is optional and choosing not to provide it will in no way affect your membership status, rights, or benefits in NEA, your state Association, or any of their affiliates.

(Check as appropriate) ______ American Indian/Alaska Native

________ Asian

________ Black

________ Hispanic

________ Native Hawaiian or other Pacific Islander

________ Other (include your self-description, if desired)

*Required for NEA State Directors only: I certify that I have been an Active member of the National Education Association for at least two (2) years immediately preceding the election.

CANDIDATE SIGNATURE (REQUIRED):

Date: ________________________________

CANDIDATES, PLEASE COMPLETE BACK OF FORM, IF APPLICABLE
IF YOU HAVE A CAMPAIGN MANAGER, PLEASE PROVIDE THE FOLLOWING INFORMATION:

Campaign manager name: 

Place of employment: 

Home mailing address: 

Primary personal phone number: 

Work phone: 

Personal email address: 

Work email address: 

For CCC use only:

Received by (please print name): 

Signature of person receiving this form: 

Date and time received: 