



# Executive Officer Nomination Form

## Self-Nomination, Consent to Serve, Standardized Vita

Please complete electronically and submit all nominations materials to [elections@nysata.org](mailto:elections@nysata.org) by March 1.

- Completed nomination form (including personal information, consent to serve, statement, and standardized vita)
- Photo of yourself suitable for publication on the NYSATA Elections web page.

For a description of responsibilities associated with each executive office, please see the ELECTIONS page under the ASSOCIATION tab at [www.nysata.org](http://www.nysata.org).

### **Executive Position You Seek** (please note that positions are available on a two year cycle as indicated below)

#### Please check one ONLY

President Elect (even years only)

Candidates for President must have served in a position on the BOT within the three years preceding their candidacy. The term of office of the President constitute four years of commitment, including one year as President Elect, two years as President, and one year as Immediate Past President. A president may not succeed him/herself but may be reelected following a one-term absence (two years following the term as Immediate Past President).

Vice President (odd years only)

Treasurer (even years only)

Secretary (odd years only)

Terms of office for Vice President, Treasurer, and Secretary shall be two years with a three-term limit. Candidates who have served three terms may choose to run again for office after a one-year term of absence.

### **Nominee Information**

Name of Nominee (First, Last)

School/District/Institution

Work Address

City

State

Zip

Home Address

City

State

Zip

Phone (School/Business)

Phone (Home/Mobile)

E-Mail (School/Business)

E-Mail (Personal/Home)

### **Consent to Serve**

I understand that if by submitting this ballot, I am nominating myself for a state level leadership position in NYSATA. I certify that I understand the term and commitment associated with the office for which I am self-nominating. I confirm that the information on this form is accurate to the extent of my knowledge. If elected, I agree to serve the term of office of the position I have applied for, to the best of my ability.

Name of Nominee

Region

Date

## **Standardized Vita**

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The information on the Standardized Vita Form will be published on the NYSATA Elections Web Page. Do not add pages to this form. Please be selective in choosing the information you include.

**List degrees held, Institution(s), and other education:**

**List NYSATA activities on the State and/or regional level including offices held, committees, honors, service, etc:**

**List teaching and related education experience:**

**List other significant professional and/or leadership related roles and accomplishments:**

## **Vision Statement**

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Please state your vision for NYSATA, art education and/or the office for which you are seeking candidacy. Your vision statement will be featured on the NYSATA website and the electronic ballot. Please do not exceed the allotted space.

**\*Please submit completed nomination form with standardized vita and vision statement along with a digital photograph of yourself to be used for publication by March 1 to the NYSATA Elections Chair at [elections@nysata.org](mailto:elections@nysata.org).**

*Campaigning is discouraged. Should you choose to send election materials out to the membership, correspondence must have "Not an official publication of the New York Art Teachers Association—Privately Funded" written clearly on the material.*