

ELECTION GUIDELINES FOR THE POSITION OF NEA STATE DIRECTOR (2021-2024)

Delegates to the WEA Representative Assembly elect NEA State Directors. NEA State Directors meet at NEA Headquarters in Washington, D.C. They are involved in critical decisions about Association policy related to public education and they help administer decisions made by delegates of the NEA Representative Assembly (the NEA's highest decision-making body). This appointment is for a 3 year term (9/1/21 – 8/31/24).

1. Nominee must be an active NEA member. (**Active** is defined as: (1) Any person engaged in the profession of teaching or in other education work who is employed in a non-supervisory position which requires that person to hold a baccalaureate degree of a Washington State Certificate (where required); (2) any classified educational support employee of any school district, college, university, or other educational institution who is employed in a non-supervisory position, and not otherwise eligible under subsection (1) above; and (3) officers of the WEA or WEA affiliates.)
2. Nominations for NEA State Director must be made by an active NEA member or group of active NEA members.
3. Nomination must be submitted on the official nomination form attached or can be made at the 2021 WEA Representative Assembly up to the closing of nominations on the floor of the Assembly. The term for the NEA State Director position is three years.
4. A nominee who wishes to have coverage on WEA's Representative Assembly website must submit their biographical information via email (250 word maximum) and may include a photograph. This information must be received by **4:00 p.m., Friday, February 5, 2021.**
5. Email nomination form, biography and photograph to WEAElections@washingtonea.org. You will receive an email confirmation letter from the WEA upon receipt of your emailed submission.
6. NEA State Directors are elected by a majority of the valid ballots cast by delegates attending the 2021 WEA Representative Assembly.

**2020-21 OFFICIAL NOMINATION FORM FOR THE POSITION OF
NEA STATE DIRECTOR**

Name of Nominee: _____

Email Address of Nominee: _____

Address: _____

(City/State)

(Zip Code)

Work Phone: (____) _____ Cell Phone: (____) _____

Local Affiliate of Nominee: _____

Acceptance by Nominee: _____
(Signature of Nominee) (Date)

Nominee's Ethnicity (please check all that apply):

- | | |
|---|---|
| <input type="checkbox"/> American Indian/Alaska Native | <input type="checkbox"/> Asian |
| <input type="checkbox"/> Black | <input type="checkbox"/> Hispanic |
| <input type="checkbox"/> Native Hawaiian/Pacific Islander | <input type="checkbox"/> Caucasian (not Spanish origin) |
| <input type="checkbox"/> Other | <input type="checkbox"/> Multi-Ethnic |
| <input type="checkbox"/> Unknown | |

Nominated by: _____
(Signature of Active WEA Member) (Print Nominator's Name)

Local Affiliate of Nominator: _____

Name of Campaign Chairperson: _____

Email Address of Chairperson: _____

Contact Phone Number of Chairperson: _____