

REGION 6 NOMINATION FORM

**For Delegates to the 2025 NEA RA
in Portland, OR ~ July 2-6, 2025**

NOMINATION:

I wish to nominate (*name*) _____

of (*local*) _____ for position of:

(SELECT FOR ANY AND ALL POSITIONS — MARK WITH AN “X”)

NEA RA Delegate

Signature of Nominator: _____

Date: _____

ACCEPTANCE: I hereby accept this nomination and certify that I’m an active member in good standing in the Association.

Signature of Nominee: _____

Nominee Address: _____

Nominee Phone Number: _____

*Nominee **Personal** Email Address:* _____

Date: _____

**Mail or fax to: IEA Region 6 Elections Committee
Attn: Region 6 Elections Chair
1012 Plummer Drive, Suite 400
Edwardsville, IL 62025
OR
IEA Fax #: (618) 656-9478**

**NOMINATION FORMS MUST BE
RECEIVED NO LATER THAN
4:00 p.m. on February 19, 2025.**

**Ballots will be distributed after
February 26th.**

Election Day is March 26, 2025.