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UNITED UNIVERSITY PROFESSIONS
2018-2020 New York State Lifeguard Corps
NOMINATING FORM: SARATOGA/CAPITAL DISTRICT REGION

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Please Read The Enclosed Call For Nominations And Instructions Before Completing This Form.

SELF-NOMINATIONS ONLY

PRINT **YOUR** NAME: _____

YOUR SIGNATURE: _____

PRINT THE NAME OF THE PARK AT WHICH YOU WORK: _____

PRESIDENT AND DELEGATE to the NYSUT RA and Other Affiliate Conventions:

● _____ *PRINT NAME* _____ *PRINT NAME OF PARK*

1st VICE PRESIDENT AND DELEGATE to NYSUT RA and Other Affiliate Conventions:

● _____ *PRINT NAME* _____ *PRINT NAME OF PARK*

DELEGATE to NYSUT RA and Other Affiliate Conventions:

● _____ *PRINT NAME* _____ *PRINT NAME OF PARK*

SECRETARY:

● _____ *PRINT NAME* _____ *PRINT NAME OF PARK*

TREASURER:

● _____ *PRINT NAME* _____ *PRINT NAME OF PARK*

NYSLC REPRESENTATIVE ASSEMBLY DELEGATE FOR SARATOGA/CAPITAL DISTRICT REGION:

(Cherry Plain, Grafton Lakes, Mine Kill, Moreau Lake, Saratoga Spa State Park, John Boyd Thacher, Thompson's Lake)

● _____ *PRINT NAME* _____ *PRINT NAME OF PARK*

NOTE: The term of office for **ALL** positions is October 1, 2018 to September 30, 2020. For this election self nominations **ONLY** will be accepted. Your signature on this form indicates a willingness to be nominated and to serve if elected. This form must be returned by mail to the Constitution and Governance Committee, UUP, P.O. Box 15143, Albany, NY 12212-5143, and **RECEIVED**, not postmarked, no later than 5:00 P.M. on Wednesday, **JULY 25, 2018**. UUP is not responsible for any delays by the United States Postal Service (USPS) or any private delivery company. Please allow seven to ten days mailing time.

POLICY: No State of New York or NYS Lifeguard Corps. equipment and/or resources may be used to produce and/or distribute campaign material for NYS Lifeguard elections. This prohibition includes printers, copiers, supplies, park mail system, bulletin boards, and e-mail domains belonging to the State of New York or NYS Lifeguard Corps. from **ANY** computer.

