

Nominations for election to office for AFT 1839
(Self-nominations permitted)

Date: _____

Union office: _____

Name of union member* being nominated for this office:

Your name (Please print): _____

Your name: (Signature): _____

* Only members in good standing may be nominated to hold union office.

Date nomination received by Elections Committee: _____

Signature of Elections Committee member receiving form:

FORMS ARE DUE BY: