

**NYS IAAI Chapter 23**

**Nomination Form**

Candidate Information

Full Name:

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Position Contested:

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Email:

Phone Number:

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Explanation of how you meet the eligibility requirements:

Candidate Declaration

*I hereby accept the nomination for the position indicated above and declare that to the best of my knowledge I am eligible to contest the position, and if elected, to hold office.*

Candidate's Name:

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Candidate's Signature:

Date:

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*I affirm that I am willfully signing this document electronically in order to submit this form.*

*Administrative Use Only:*

*Nomination Form Received By (name & title):*

*Date:*

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*Forwarded to Nomination Committee Member (name):*

*Date:*

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