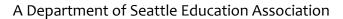
## Seattle Substitute Association





## SSA Board Nomination Form 2017-18

| Name:   | Cell:  |   |
|---|--|---|
| Address:  | City:  | Zip:  |
| Home email:   | Certificated   | Para-educator   |
| I consent to place my name for election to fill t<br>terms ending August 2018:  Vice President At Large SEA Board Member—s  | ·  | •   |
| From the Substitute Bylaws:   |  |   |
| ARTICLE I   | V. ELECTED OFFICERS  |   |
| Section 1.0 OFFICERS  .1 The officers of the SSA, shall be President, a Vice representatives to compose an SSA Executive Boa. 2 The SSA President and Vice-President shall serviciation's Board of Directors. Attendance at the SI members of the SSA Executive Board, at the direct and Each officer shall be an active member who had the membership year.  Please provide a brief background of your organthe SSA Board: | ard of up to eight. ve as ex officio representatives to t EA Board meetings may be rotated ction of the SSA President. Is been actively involved with the as | he Seattle Education Asso-<br>among the<br>ssociation from the first of |
| Your candidate statement (Please limit to 250 v   | words):  |   |

Bring the completed form to the September 28th General Meeting where you will speak. Your statement will be printed in the Substitute Voice and the election will be held during the October 26th meeting.