OFFICER NOMINATION FORM (Please Type or Print)

l,	, nominate	e		
Name of	Nominator	Name of Nominee		
for the office of				
and attest they are an NA	EA member.			
NOMINEE INFORM	TATION			
Membership Division	ID #	Region		
Nominee's Home Addres	s Street/P.O. Box			
	Street/P.O. Box Position/Ti			Zip+4
Work Address	School/Building Street/P.O. Box	City	State	Zip+4
Home Phone ()	Work Phone()			·
	s., Miss, Mr.) Last ss Street/P.O. Box	First	State	M.I.
Work Address				•
	School/Building Street/P.O. Box	City	State	Zip+4
Home Phone ()	Work Phone()	E-mail		
Include a	a quality photograph for publication	n (picture return is not	guaranteed)	
NOMINATIO	NE DOCTMADVED AFTED	lenueni 27 WILL	DE INIVALID	
NOWINATIC	ONS POSTMARKED AFTER	January 27 WILL	BE INVALID.	ı
For Office Use:				
Membership Verification	Initials			
Expiration Date Mem	bership # Region			

STANDARDIZED VITA FORM (Please Type or Print)

Page 1 of 2

The information provided on the Standardized Vita Form will be reviewed by a nomination committee and will be sent to the NAEA national office for use in NAEA publications and/or the website. Do not add pages to this form. Please be selective in deciding what information to include.

Name	Hom	ne Phone ()
Name(Dr., Mrs., Ms., Miss, Mr.) Last	First M.I.	· · · · · · · · · · · · · · · · · · ·
Home AddressStreet/P.O. Box		
Street/P.O. Box Office nominated for		State Zip+4
Title (Currently employed as)	Employer	
Work AddressStreet/P.O. Box		
Street/P.O. Box Home Phone () Work		State Zip+4
LIST National Art Education Association nation honors, service, etc.:	nal and regional art education association acti	vities, including offices held, committees
LIST state/province and local art education associ service, etc.:	iation activities, including offices held, commi	ttees, honors,

STANDARDIZED VITA FORM (Please Type or Print)

LIST experience as an NAHS/NJAHS chapter sponsor, including how long you have served as a sponsor:
LIST other leadership roles and accomplishments:
List other readership roles and accomplishments.
LIST memberships in professional organizations, including offices held, honors, etc.:
LIST publications and/or exhibits:
LIST other teaching and/or related experiences:

National Art Education Association

NATIONAL OFFICE NOMINEE CONSENT TO SERVE FORM

I understand that my name has been put forward for nomination to the position of NAEA:

Middle-Level Member-at-Large of the NAHS National Council Secondary Member-at-Large of the NAHS National Council

If I am selected for the final slate of nominees for this office, and if I am elected, I agree to serve.

Signature Date				
Please provide the following information, complete the attached Standardized Vita Form and return it along with a black and white photograph to the Nominations Committee Chair no later than February 19.				
Name				
Home Address				
Home Phone (Indicate best time to call)				
E-mail Address				
Current Professional Position				
Percent of time in this position Work Phone (Indicate best time to call)				
Employer				
Address				
Summer Address (if different from above)				
Summer Phone				

Please note that this information, and that on the Standardized Vita Form, will be used by the Nominating Committee in its process of selecting the final slate of candidates. We appreciate your willingness to provide this information and encourage you to make it as complete as possible with the space available. Do not attach additional or substitute materials. Because of the extensive distribution to the committee that is required by the process, it is important to keep information as concise as possible. Thank you for your willingness to be considered for NAEA national office. These positions on the National Board of Directors are essential in establishing the goals and policies of NAEA and are significant in determining the future of art education in the schools of this country and in many other nations as well.