RETIRED RA DELEGATE NOMINATION FORM

(Nomination of an FEA Retired Member)

I, _____, do hereby nominate

_____ (can be self) for the office of:

☐ Retired Representative Assembly Delegate

Signature: _____ **Date:** _____

If you choose to type your name, you acknowledge that your typed name serves as your electronic signature.

Mailing Address: _____

_____

Home Phone: _____

Personal E-mail (non-DoDEA): _____

Requirements: Candidates must be a Retired member of FEA and must fulfill the requirements of unified membership in the United Education Profession.

Submission Instructions:

☐ Scan and e-mail this form to: Federal.Retired@nea.org

Deadline: Forms must be received by **February 19, 2027.**