

# NOTICE OF CHAPTER CHAIR ELECTION 2020-2021

Please fill in all information asked for below. Return this completed form to UTLA as soon as possible after the election via email to [psykes@utla.net](mailto:psykes@utla.net). Due to the Safer At Home orders related to COVID-19, we are only accepting these forms via email.

School \_\_\_\_\_ Chapter Code \_\_\_\_\_

Date election was held \_\_\_\_\_ UTLA Area \_\_\_\_\_  
(Choose one)

Name of 2019-2020 Chapter Chair \_\_\_\_\_

School Phone #(\_\_\_\_\_) \_\_\_\_\_ School Fax#(\_\_\_\_\_) \_\_\_\_\_

## DATA FOR 2020-2021

Chapter Chair \_\_\_\_\_ Employee # \_\_\_\_\_  
(one per site) (Please use full legal name)

First time Chapter Chair? YES \_\_\_\_\_ NO \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_ (NON-LAUDS) Email Address \_\_\_\_\_

Home Phone #(\_\_\_\_\_) \_\_\_\_\_ Cell Phone #(\_\_\_\_\_) \_\_\_\_\_

1<sup>st</sup> Vice-Chair or Co-Chair \_\_\_\_\_ Employee # \_\_\_\_\_  
(Co-Chair for 80+ Teachers) (Please use full legal name)

Home Address \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_ (NON-LAUDS) Email Address \_\_\_\_\_

Home Phone #(\_\_\_\_\_) \_\_\_\_\_ Cell Phone #(\_\_\_\_\_) \_\_\_\_\_

2<sup>nd</sup> Vice-Chair \_\_\_\_\_ Employee # \_\_\_\_\_  
(one per site) (Please use full legal name)

Home Address \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_ (NON-LAUDS) Email Address \_\_\_\_\_

Home Phone #(\_\_\_\_\_) \_\_\_\_\_ Cell Phone #(\_\_\_\_\_) \_\_\_\_\_

Election Committee Chair's name (please print) For Contested Elections Only \_\_\_\_\_

Election Committee Chair's signature (not the chapter chair) \_\_\_\_\_

Election Committee Chair's phone number #(\_\_\_\_\_) \_\_\_\_\_

*Please make a copy for your UTLA Chapter's records*

<b>For Office Use Only</b>	
Verified <input type="checkbox"/>	Date: _____
Note:	