

# 2021 CONVENTION DELEGATE ELECTION

## Western Region Retired Members

This June, retired NYSNA members in the Western Region will elect a Convention Delegate and two Alternates to represent us at the annual NYSNA Convention.

- Convention Delegates will serve for a three-year term. A member is eligible to run for Convention Delegate only if he or she is not: (1) in arrears in the payment of dues, fees, or financial obligations to NYSNA; (2) a supervisor or manager within the meaning of the National Labor Relations Act, within the twelve (12) months preceding nomination; or (3) a member of the NYSNA staff.
- Members can self-nominate or be nominated by another member in good standing.
- We will select the highest vote getter as the Convention Delegate, and the next two highest as the Alternates.

If you're thinking of running, you can find more details, including the delegate election policy, on the NYSNA website [nysna.org/delegate](https://nysna.org/delegate).

## ELECTION DETAILS

### WE WILL ELECT:

**1 Convention Delegate**  
**2 Alternates**

### ALL FORMS ARE DUE:

**Friday, May 28 by 5:00 PM**

### RETURN FORMS TO:

**[website@nysna.org](mailto:website@nysna.org)**

### ONLINE BALLOTS WILL BE SENT:

**Monday, June 7 at 10:00 AM**

### ONLINE BALLOTS MUST BE RETURNED BY:

**Monday, June 28 at 4:00 PM**

If you do not get a ballot on Monday, June 7, please email [website@nysna.org](mailto:website@nysna.org) and a replacement will be sent to you

**Nominations and Consent to Serve forms  
are due by Friday, May 28 at 5:00 PM**

New York State  
**NURSES**  
ASSOCIATION

# 2021 CONVENTION DELEGATE ELECTION Western Region Retired Members

## NOMINATION & CONSENT TO SERVE FORM

\_\_\_\_\_  
Name of nominee (print name as you wish it to appear on the ballot)

[ ] Self-Nomination

\_\_\_\_\_  
Name of Nominator

\_\_\_\_\_  
Nominee's unit

\_\_\_\_\_  
Nominee's home address

\_\_\_\_\_  
City

\_\_\_\_\_  
State.

\_\_\_\_\_  
ZIP Code

\_\_\_\_\_  
Nominee's home phone

\_\_\_\_\_  
Cell phone

\_\_\_\_\_  
Nominee's work phone

\_\_\_\_\_  
Fax

\_\_\_\_\_  
Nominee's email

### CONSENT TO SERVE (To be completed by Nominee)

Your consent is required to serve as a Convention delegate. Your signature indicates that you consent to serve. A member is eligible to run for and serve as a Convention Delegate only if he or she is not (1) in arrears in the payment of dues, fees and financial obligations to NYSNA; (2) a supervisor or manager within the meaning of the National Labor Relations Act at any place of employment (nor having held such a position in the 12 months prior to the election); or (3) a member of the NYSNA staff.

\_\_\_\_\_  
Nominee Signature

\_\_\_\_\_  
Date

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New York State  
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