

**EASTERN REGION**  
ASSOCIATION FOR FAMILY AND COMMUNITY EDUCATION

**NOMINATION FOR OFFICE**

**NAME** \_\_\_\_\_

**COUNTY** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_  
(street) (city) (zip) (telephone)

**FCE CLUB MEMBER (NUMBER OF YEARS):** \_\_\_\_\_

**OFFICES HELD:**  
**CLUB** \_\_\_\_\_

**COUNTY** \_\_\_\_\_

**REGION** \_\_\_\_\_

**FCE COMMITTEES SERVED ON:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FCE AWARDS/RECOGNITIONS:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**COMMUNITY INVOLVEMENT:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FCE LEADERSHIP EXPERIENCE:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ **FROM** \_\_\_\_\_ **COUNTY IS NOMINATED FOR**  
**THE OFFICE OF** \_\_\_\_\_.

**IF ELECTED, I WILL CARRY OUT ALL THE DUTIES OF THE OFFICE TO WHICH I AM ELECTED TO THE BEST OF MY ABILITY.**

\_\_\_\_\_ (Signature) \_\_\_\_\_ (Date)

Use additional sheet if necessary.