

OFFICIAL NOMINATION FORM

OHIO NATIONAL GUARD ENLISTED ASSOCIATION

1299 Virginia Ave. Columbus, OH 43212, 1-800-642-6642

THE FOLLOWING NOMINATION FOR OFFICE IN THE ONGEA IS MADE IAW ARTICLE 10 OF THE ONGEA BY-LAWS

l,	, hereby	submit for Nomination to the office of
	of the Or	nio National Guard Enlisted Association.
CRED	ENTIALS FOR THE POSI	TION
Ohio National Guard Positions and Cor	mmittees worked on by nomi	nee:
Local Unit: (i.e. unit rep)		
State National Guard:		
National Guard Bureau:		
Number of ONGEA Conferences attended	ded Number of EAN	IGUS Conferences attended
Number of Executive Board meetings a	attended	
Are you a Full Time Employee of the O	hio National Guard?	_
Employer:		
Unit of Assignment and location:		
Home address:		
Phone numbers: Home	Business	FAX
I am to a section to the first the first time.	STATEMENT	
I am in a position to take the time ned duties of the ONGEA Office I am seeki necessary to discharge the duties of the and agree that I must bear all or part of sanction of my spouse to take the time seeking.	ing. I am financially sound ar ne office for the duration of th f the expense of the office I a	nd able to devote the time and money e administrative year and understand m seeking. I have the permission and
I have carefully examined the foregoing best of my knowledge. I further state, if an official capacity for the coming year, serve the utmost of my ability, to faithful am elected to.	f elected, to serve the Ohio N . I shall contribute the time, th	National Guard Enlisted Association in me money, and the effort necessary to
		Signature