

OHIO SOCIETY CHILDREN OF THE AMERICAN REVOLUTION 2018-2019 STATE OFFICER NOMINATION FORM

This form has been prepared to assist the members of the Nominating Committee in selecting qualified candidates for state office. Please complete this form in as much detail as possible to provide the Nominating Committee a full description of your qualifications. Information can be checked against O.S.C.A.R. records for accuracy. **Completion of this form does not guarantee that you will be nominated for state office, and it does not obligate the committee in any way.** Members not nominated by the Committee may run for office from the floor.

To be eligible to be a candidate for state office, a member must meet ALL of the following qualifications:

1. For the office of State President, a member shall have served as a president, first vice president, or vice president of a local society and at least one term as a State Officer. To be eligible for other state offices, a member shall have served as an officer of a local society.
2. **Current state and national dues have been paid.**

Completed form must be postmarked no later than **December 15, 2017**, and mailed to **Brenda Cooper, 5355 N Dayton-Lakeview Rd, New Carlisle, OH 45344-9591.**

Name _____ Address _____
 Telephone Number () _____ E-mail Address _____ Age _____
 National Number _____ Date of Birth _____ Years in C.A.R. _____ Local Society _____

The following officers are to be elected during State Conference. Please mark with a "1" the office you are most interested in and capable of holding. Mark second and third choices with a "2" and "3". Are you interested in being State President in the future? ___ Yes ___ No ___ Unsure

Choice	Choice	Choice	Choice
____ President	____ Chaplain	____ Corresponding Sec'y	____ Historian
____ 1st Vice Pres	____ Recording Sec'y	____ Treasurer	____ Librarian
____ 2nd Vice Pres	____ Organizing Sec'y	____ Registrar	____ Curator

Please indicate offices you have held by marking an "S" for State and/or "L" for local in each applicable office.

____ President	____ Chaplain	____ Corresponding Sec'y	____ Historian
____ 1st Vice President	____ Recording Secretary	____ Treasurer	____ Librarian
____ 2nd Vice President	____ Organizing Secretary	____ Registrar	____ Curator

The following is a list of committee chairmanships recognized by the State Society. Please indicate chairmanships you have held by marking an "S" for State and/or "L" for local in each applicable chairmanship.

____ American Heritage	____ Kids Helping Kids	____ Awards
____ American History	____ Magazine Fund	____ Bylaws
____ American Indian	____ Membership	____ Credentials
____ Archives	____ National Merit Award	____ Leadership Development
____ C.A.R./DAR/SAR/S.R. Relations	____ Patriotic Education	____ Long Range Planning
____ C.A.R. Magazine & Newsletters	____ Public Relations	____ Nominating
____ Conservation	____ National Project	____ Ohio Service Award
____ Endowment Fund	____ N.S.C.A.R. Soc in Foreign Countries	____ Resolutions
____ Government Studies	____ Tomb of the Unknown Soldier	____ State Project
____ Information Technology	____ Veterans	

REASON FOR SEEKING OFFICE
(Please complete the following sentence.)

I would like to be nominated as a candidate for state office, because...

PARTICIPATION IN C.A.R. EVENTS
(Please attach additional sheets and provide as much detail as possible.)

1. List your level of participation at each, i.e. delegate, alternate, Page, Aide, Color Bearer, conference chairman or committee member, band or chorus member, State Conferences, Regional Meetings, and National Conventions you have attended.
2. List any special C.A.R. experiences that are not documented above.

CONSENT:

I would like to be nominated for election to a state office. If elected to office, I understand that in addition to performing the duties of my office, I am expected to attend the O.S.C.A.R. State Conference, the Summer and Winter Board Meetings, and encouraged to attend any other state events, and the Great Lakes Regional Meeting. My national, state, and local dues have been paid. The statements made on this form are true and correct to the best of my knowledge.

PARENTAL CONSENT:

I understand the commitments my child will be making if elected to state office and that his/her name, address, phone number, and E-Mail address will be printed in the *Buckeye Briefs* (or on the internet in a secure area of the O.S.C.A.R. website), mailed to members and seniors of the Ohio Society and those affiliated with the National Society (as requested for programming purposes or approved by the State Board of Management), and those with subscriptions. My child has permission to become a candidate for state office.

Candidate's Signature _____ Date _____

Parent's Signature _____ Date _____