

OHIO SOCIETY CHILDREN OF THE AMERICAN REVOLUTION 2012-2013 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 21, 2011**, and mailed to **Mrs. Brenda Cooper**, 5355 N Dayton Lakeview Rd, New Carlisle, OH 45344-9591.

Name _____ Address _____

Telephone Number () _____ E-mail Address _____

Age _____ Date of Birth _____

National Number _____ Number of Years of C.A.R. Membership _____ 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".

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

Are you interested in being State President at some time in the future? _____ Yes _____ No _____ Unsure

Please indicate offices you have held by marking an "X" in the appropriate state (S) or local (L) column for offices you have held in the list below.

S L	S L	S L	S L
____ President	____ Chaplain	____ Treasurer	____ Librarian-Curator
____ 1 st Vice President	____ Recording Sec'y	____ Corresponding Sec'y	____ Librarian
____ 2 nd Vice President	____ Organizing Sec'y	____ Registrar	____ Curator

The following is a list of committee chairmanships recognized by the State Society. Please indicate chairmanships you have held by marking an "X" in the appropriate state or local column.

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

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 _____