

**Faculty Staff Union**

**Executive Committee Nomination Form**

**Fall 2024 Tenured Faculty Special Election**

*This is the official Fall 2024 Tenured Faculty special election nomination form.*

NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DEPARTMENT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TITLE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

POSITION SEEKING: \_\_\_\_\_\_\_\_\_Tenured Faculty\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(For job descriptions, go to: <http://www.fsu.umb.edu/content/fsu-bylaws>.)

Contact Information (for Elections Committee use only)

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Candidate Statement

A 150-word statement (maximum number of words) on why you are running for this position. The statement will be distributed to all voting members.

*By signing this nomination form I agree that my candidate statement (maximum 150 words) will be distributed to all voting members exactly as written above. I also agree to follow all election rules.*

*If I opt not to submit a candidate statement, I acknowledge that no candidate statement will be accepted after submittal of this nomination form.*

*I hereby certify that the information provided is true and correct to the best of my knowledge.*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: Date:

Due no later than 4PM on **Friday, September 27,2024**. Email the completed form as an attachment to FSU.Elections@umb.edu. Include “Tenured Faculty Nomination Form” in the subject line. A confirmation email will be sent within one business day after submittal.