CORRECTIONAL EDUCATION ASSOCIATION OF OHIO

**DECLARATION OF CANDIDACY FORM**

**CEAO Vice President, Treasurer, or Secretary**

NAME: Click or tap here to enter text.

CANDIDATE POSTION DECLARING FOR: Choose an item.

MAILING ADDRESS: Click or tap here to enter text.

HOME TELEPHONE NUMBER: Click or tap here to enter text.

WORK TELEPHONE NUMBER: Click or tap here to enter text.

HOME EMAIL: Click or tap here to enter text.

WORK EMAIL: Click or tap here to enter text.

EMPLOYING AGENCY: Choose an item.

INSTITUTION/OFFICE: Click or tap here to enter text.

INSTITUTION/OFFICE ADDRESS: Click or tap here to enter text.

My signature affirms that I am a member in good standing of the Correctional Education Association of Ohio. I agree fully that, if elected to the position of CEAO (**circle one**): Vice-President, Treasurer, Secretary, I shall willingly carry out the duties and responsibilities as stated in the CEAO Constitution and Bylaws.

SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please print, sign, date, and mail (or sign, scan and email) the candidacy form to the following address
(must be postmarked by January 15 , 2020):**

**CEA-O
P.O. BOX 1212
GROVE CITY, OH 43123**

**Email to:**

**jen@fornal.org**