

ICEC
Officer Nomination Form
Elected Position for 2012

Please complete this form with the permission of the nominee. Include also the signatures of both the nominator and the nominee. Thank you for your support of ICEC.

Position: ___ Regional Director for Region VI: July 01, 2013 to June 30, 2015
 ___ Regional Director for Region VIII: July 01, 2013 to June 30, 2015

Name of Nominee: _____ e-mail: _____

Address: _____ City, State & Zip code: _____

Home telephone number: _____ Work telephone number: _____

Cell phone number: _____

Job title: _____ Employer: _____

Current Local CEC Chapter – Name & Number: _____

CEC Membership number: _____ Number of years as a member: _____

Current & Past Participation with the Council for Exceptional Children:

Chapter Offices held and Committees chaired or served upon:	Dates:
_____	_____
_____	_____
_____	_____

ICEC Offices held & Committees chaired or serviced:	Dates:
_____	_____
_____	_____
_____	_____

CEC Offices held & Committees chaired/served:	Dates:
_____	_____
_____	_____

Participation in Division & Subdivisions:	Dates:
_____	_____
_____	_____

Membership in other Professional & Educational Organizations: Dates:

Contributions to education in General:

Dates:

Additional Comments or Information pertinent to this nomination:

For the Nominee: I give permission for my name to be placed in nomination for the ICEC office of _____.

Signature: _____

FOR THE NOMINATOR: Name of Nominator: _____

Representing Chapter: _____

Please write a statement indicating your reason for nominating _____

for the office of _____.

Signature of Nominator: _____ Date: _____

This nomination form must be received by **January 25, 2012**

Forward to either ICEC Nominations Co-Chair's

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