

*Illinois Alpha Delta Kappa*  
Nomination of Candidate for State Office

Name of Candidate \_\_\_\_\_

Address \_\_\_\_\_

Chapter \_\_\_\_\_ District \_\_\_\_\_

Candidate for Office of \_\_\_\_\_

Years of Membership in Alpha Delta Kappa \_\_\_\_\_

International Conventions Attended \_\_\_\_\_

State Conventions Attended \_\_\_\_\_

District Meetings Attended \_\_\_\_\_

State Offices Held \_\_\_\_\_

State Committees \_\_\_\_\_

Chapter Offices Held \_\_\_\_\_

Educational Background \_\_\_\_\_

Teaching Experience \_\_\_\_\_

Organizational Affiliations \_\_\_\_\_

Additional Information:

\_\_\_\_\_  
Signature of Candidate

\_\_\_\_\_  
Submitted by \_\_\_\_\_ Chapter

\_\_\_\_\_  
Signature of Chapter President

\_\_\_\_\_  
Signature of Chapter Recording Secretary

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Please enclose a 4" x 6" picture and send (postmarked by March 1, 2020). Candidate applications postmarked after March 1, 2020, will be accepted as nominations from the floor of the convention as per the bylaws. Forms and photos may also be submitted by email (please indicate AΔK on the subject line).

**MAIL APPLICATIONS TO: KAREN HURST**

**email: [kyhurst@sbcglobal.net](mailto:kyhurst@sbcglobal.net)**

**248 E. IDLEWOOD**

**MORTON, IL 61550**

**phone: 309-241-0360**