



**Self - Nomination Form for the Position of Director  
Retiree Council 7  
Deadline for Submission – 10/01/19**

*Please print the following contact information:*

Name (First, Last) \_\_\_\_\_

Address (Street, City, Zip) \_\_\_\_\_

\_\_\_\_\_

Home phone \_\_\_\_\_

Cell phone \_\_\_\_\_

Email address \_\_\_\_\_

District retired from \_\_\_\_\_

Local Positions and RC 7 Committees \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*Please use the back if more space is needed.*

**Return to: Retiree Council 7 c/o NYSUT Regional Office,  
4983 Brittonfield Parkway, Box 247, E. Syracuse, NY 13057  
Attn: Loretta Donlon**