

EMPLOYEE NOMINATION FORM STATE PERSONNEL BOARD 2021

I, the undersigned certified state employee, hereby nominate the following person as a candidate for election to the State Personnel Board:

NAME OF NOMINEE TO BOARD: _____

INFORMATION ABOUT THE CERTIFIED STATE EMPLOYEE WHO IS MAKING THE NOMINATION:

EMPLOYEE NAME (PRINT FIRST AND LAST NAME)	WORK EMAIL AND PHONE NUMBER	STATE AGENCY OR HIGHER ED CAMPUS WHERE EMPLOYEE WORKS	MONTH/YEAR EMPLOYEE BECAME CERTIFIED

EMPLOYEE SIGNATURE: _____
(Signature of employee who is making the nomination)

INSTRUCTIONS TO EMPLOYEE: Only certified state employees are eligible to sign this Employee Nomination Form. An Employee Nomination Form will be invalid without all of the requested information, including the employee's signature. Once the Employee Nomination Form is complete, the employee should save it electronically (preferably as a PDF) and send it via email to the candidate.

INSTRUCTIONS TO CANDIDATE: Please collect 100 signatures of state certified employees using the Nominating Petition Form, the Employee Nomination Form, or a combination of both. The deadline for submission is **April 30, 2021**.