The Connecticut Environmental Health Association (CEHA) is accepting nominations for elective office for this year’s election period. **The deadline for submitting a nomination form has been extended to December 1, 2020.** Nominations must be made by a CEHA member and nominees must be CEHA members in good standing. CEHA members may nominate themselves for elective office if they so desire. Candidates must discuss their nomination with their employer and get approval to ensure that they will be permitted to fulfill the duties and responsibilities of the Office (see pg 2). Each nominee must submit a short biographical description along with an explanation of why they are interested in being elected to the office they seek and this information will be included with the Election Ballot.

Prospective candidates are strongly encouraged to attend Executive Board meetings which are open to all members. They should review the by-laws and policies of the Association that are available on the CEHA website at www.cteha.org which provide an overview of the duties and responsibilities of each Officer of CEHA. It is an honor and privilege to hold a CEHA elective office so please, get involved!

Candidate Nominated for the Position of:

□ Vice President  
Candidate Name: ___________________________ e-mail: ___________________________  
Title: ___________________________ Phone: ___________________________ Fax: ___________________________  
Employer: ___________________________ Mailing Address: ___________________________  
City: ___________________________ State: __________ Zip Code: __________

Candidate Nominated for the Position of:

□ Secretary  
Candidate Name: ___________________________ e-mail: ___________________________  
Title: ___________________________ Phone: ___________________________ Fax: ___________________________  
Employer: ___________________________ Mailing Address: ___________________________  
City: ___________________________ State: __________ Zip Code: __________

Nomination submitted by: ________________________________________________________  
Signature of Nominator: ________________________________________ Date: __________

Mail Nomination Forms to: BBHD Attention Phyllis Amodio 240 Stafford Ave. Bristol CT 06010  
Contact Phyllis Amodio at (860) 584-7682 or phyllisamodio@bristolct.gov with any questions
CEHA Nomination for Elective Office to be completed by Nominee (additional sheets may be attached)

Nominee _________________________________ Elected Position Sought: _____________________________

Employed by: _____________________________ Address: _____________________________

Candidate Biography:
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

Reasons Why Candidate Is Seeking Elective Office:
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

Candidate Signature: _________________________________________  Date: _________________

Please note: The Vice President position is a multi-year commitment ultimately leading to President. The Secretary position is a two year elected commitment.

Statement by candidate’s supervisor:

I hereby acknowledge the candidacy of _____________________________ Name of Candidate
for the office of ____________________________ for the Connecticut Environmental Health Association.
Signed _____________________________ Date: __________________

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