APPENDIX 2
APA CALIFORNIA 2018 ELECTION ELIGIBILITY FORM

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone number: _____

E-mail address: _____ APA membership number: _____

Please indicate the position(s) for which you are interested in pursuing. If you are interested in more than one position, indicate your preference in priority order, with "1" being highest priority, "2" being second priority, etc.

APA California members from all Sections are welcome to submit their names as potential candidates. Members must meet any qualifications, as stated in the APA California Bylaws, required for a position.

Position	Interest
Vice President for Policy & Legislation	____
Vice President for Professional Development (Must be AICP)	____
Commissioner and Board Representative	____

"I am committed to accepting nomination and running for the position(s) indicated above. If elected, I agree to devote the necessary time and energy to serve in this position, including participation, in person, at the orientation for new Board Members and Annual APA Board Retreat in January/February 2018."

_____ _____
Signature Date

E-mail this document to Julia Lave Johnston, APA California President Elect, by April 16, 2018; e-mail: julialavejohnston@gmail.com.