

Ohio District Optimist Governor Elect Nomination Form

Please PRINT or TYPE all information and send to Candidate Qualifications Chair, along with all necessary paperwork. Use additional paper if needed.

Name: _____

Address: _____

Home No. with Area Code: _____

Work No. with Area Code: _____

Fax No. with Area Code: _____

Cell No. with Area Code: _____

Email Address: _____

Employer' Name: _____

May we contact place of business? _____ Yes No _____

If yes, phone number with Area Code is: _____

Self-Employed / Retired _____

Date of Birth: _____ Age: _____

Partner's Name: _____

Children's Names:

Home Optimist Club Name: _____

Year you served as President: _____

Club where you served as President: _____

Year Served as Lt. Governor: _____

Zone Served as Lt. Governor: _____

Would your job keep you from traveling around the state and out of state for training/conventions? _____ Yes No _____

I acknowledge that a current letter from my home club in support of my candidacy is required to complete this application.

Year and position held as District Chair:

Do you know that this is an five (5) year commitment?

_____ Yes No _____

Optimist Awards & Honors:

Why do you want to be Governor of the Ohio District?

Note: If you are self-employed or retired the candidate does not need to submit a letter confirming his/her ability to devote necessary/required time to perform duties of Governor.