

# 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:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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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:

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

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**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.