

PSEA HOUSE OF DELEGATES
Local Delegate Change Form

PSEA BYLAWS - Article VII -- House of Delegates

B. Delegates shall not be seated at the annual meeting until they have presented a certificate of election signed by an officer of the body which they represent.

I hereby authorize _____
(Alternate's name)

Member ID # _____
(Alternate's ID #)

**HOME Email Address* _____

To replace _____
(Delegate's name)

Member ID # _____
(Delegate's ID #)

to attend the House of Delegates as a full voting delegate representing _____
(Local's name)

** The email address that you provide will be used to send all information regarding the House, including the link that delegates must use to access the virtual on-line PSEA House of Delegates. Actual admission to the House will also be based on this email address.*

(Local Officer - PLEASE PRINT)

(Position)

(Local Officer's Signature)

(Date)

Please email this completed form to drutledge@psea.org as soon as possible to request a delegate change.

DELEGATE CHANGE FORM MUST BE SUBMITTED
NO LATER THAN 5:00 P.M. ON MAY 6