

NOTICE OF CHAPTER CHAIR ELECTION (NOCCE) 2025-2026

Please fill in all information asked for below. Return this completed form to UTLA as soon as possible according to the deadline guidelines to dina.zubia@utla.net.

School _____ Chapter Code _____

UTLA Area _____ (Or Circle One) N S E W C VE VW H

Name of 2024-2025 Chapter Chair _____

School Phone # (_____) _____ School Fax# (_____) _____

DATA FOR 2025-2026

Chapter Chair _____ Employee ID# _____
(Please use full legal name)

First time Chapter Chair? YES _____ NO _____

Home Address _____

City Zip Code

(NON-LAUDS) Email Address

Home Phone #(_____) _____ Cell Phone
#(_____) _____

1st Vice-Chair _____ Employee # _____
(one per site) (Please use full legal name)

Home Address _____

City Zip Code (NON-LAUDS) Email Address

Home Phone #(_____) _____ Cell Phone #(_____) _____

2nd Vice-Chair _____ Employee # _____
(Please use full legal name)

Home Address _____

City Zip Code (NON-LAUDS) Email Address

Home Phone #(_____) _____ Cell Phone #(_____) _____

3rd Vice-Chair _____ Employee # _____
(3rd Vice Chair for schools with 80+ members) (Please use full legal name)

Home Address _____

City Zip Code (NON-LAUDS) Email Address

Home Phone # (_____) _____ Cell Phone # (_____) _____

Date election was held _____

Election Committee Chair's name (*please print*) For Contested Elections Only _____

Election Committee Chair's signature (*not the chapter chair*) _____

Election Committee Chair's phone number (____) _____

Please make a copy for your UTLA Chapter's records