



PARAPROFESSIONAL NOMINATING FORM 2021
DELEGATE TO UFT DELEGATE ASSEMBLY

I nominate (print) _____

UFT ID # _____ Home Tel. No. (_____) _____

Home Address _____ Apt. No. _____ Zip Code _____

School _____ District _____ Non-DOE Email _____

Paraprofessional Name (print) _____

UFT ID # _____ Home Tel. No (_____) _____

Home Address _____ Apt. No. _____ Zip Code _____

School _____ District _____ Non-DOE Email _____

Date: _____ Signature _____

NOTE: Nominating forms must be received at UFT by:
5 PM, Wednesday, April 14, 2021

Mail completed forms to:

**Paraprofessional Election Committee
United Federation of Teachers
52 Broadway 15 Fl
New York, NY 10004**