

2026

**AFFILIATED ASSOCIATION OFFICIAL REPORT OF ELECTED
DELEGATES TO THE ANNUAL REPRESENTATIVE ASSEMBLY OF
THE NATIONAL EDUCATION ASSOCIATION**

2026

Please complete this form as soon as election results are known. A local affiliate must forward its delegate election forms to the state affiliate by **April 10th** or a different date set by the state affiliate to the address on the State's Return Addresses sheet.

Election Results (Continued for Local/Unit: _____)

| | | | | | |
|---|--|--|--|--|--|
| First Name*: | | | Last Name*: | | |
| IND ID/Alt ID*: | | | Personal Email*: | | |
| Cell Phone*: | | | Record Type*: Delegate Successor | | |
| Number of Terms Elected (1 2 3) | | | Start Year: End Year: the CY is of a year term | | |
| Level: Higher Ed PreK-12 N/A | | | Rank: Number of Votes Received: | | |
| Race/Ethnicity*: American Indian/Alaska Native Asian Black or African American Latin(o/a/x), Hispanic, or Chican(o/a/x) Middle Eastern or North African Multiracial Native Hawaiian/Pacific Islander White Other Race or Ethnicity Unknown | | | | | |
| Position: Active Life Admin Aspiring Educator Ed Support Retired Teacher | | | | | |

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*Required Information