Tribal Secretary Stamp Only:

ONEIDA ELECTION BOARD ALTERNATE/GTC OFFICIAL APPLICATION



Date:						
Legal Name:				Roll	Roll #	
(Please print)		M.I.	Last			
Mailing Address:						
ŭ	Street		City	State	ZIP Code	
Home/Work Phone:		Cell Phone	e:	_ E-mail:		
1. Explain your	experience with	n Elections:				
2. Are you intercheck appropriat		ng as an □ Alternate an	 nd ∕ or □ General Tr	ribal Council (GTC)	official? Please	
My signature bel	low acknowled	ges that all information p	provided in this app	olication is true and	correct to the best	
of my knowledge	e, and that I ha	ave read and agree with	the following state	ments if selected as	an alternate:	
_		y future conflict in writin close any conflict.	g to the Election B	oard immediately an	d that I may be	
	to abide by the	e confidentiality policies	of the Oneida Nati	ion and may be rem	loved for failure to	
		_	Signature		Date	
Submit your comple	eted application to	o the Business Committee S	'upport Office (Room #	'284), second floor of th	e Norbert Hill Center.	
Official Use by	Election Boar	d Only:				
Accept	/ Deny	Date of Election Board	Action:	Chair/Designee	Initials:	