

NSEA Officer Reporting Form

You may also contact membership@nsea.org for a listing of the officers in which NSEA currently has listed for your local.

LOCAL ASSOCIATION: _____

PRESIDENT

Name: _____
Home Address: _____
City, ZIP: _____
Home Phone: _____
Cell Phone: _____
Home Email: _____
School Email: _____
Planning Time: _____
Lunch Time: _____

CHIEF NEGOTIATOR

Name: _____
Home Address: _____
City, ZIP: _____
Home Phone: _____
Cell Phone: _____
Home Email: _____
School Email: _____
Planning Time: _____
Lunch Time: _____

TREASURER

Name: _____
Home Address: _____
City, ZIP: _____
Home Phone: _____
Cell Phone: _____
Home Email: _____
School Email: _____
Planning Time: _____
Lunch Time: _____

VICE-PRESIDENT

Name: _____
Home Address: _____
City, ZIP: _____
Home Phone: _____
Cell Phone: _____
Home Email: _____
School Email: _____

SECRETARY

Name: _____
Home Address: _____
City, ZIP: _____
Home Phone: _____
Cell Phone: _____
Home Email: _____
School Email: _____

PLEASE RETURN TO:

**Membership Department
NSEA
605 S. 14th Street
Lincoln, NE 68508**