

CONVENTION

STATE EMPLOYEES ASSOCIATION OF NORTH CAROLINA

2022 Convention Delegate Contact Information

PERSONAL INFORMATION

Name: _____
Last First MI

Home Address: _____
Street Address Apartment/Unit #

_____ City County State ZipCode

Work Phone: () _____ Home Phone: () _____

Cell Phone: () _____ Fax Number: () _____

Primary email address for SEANC business: _____

Secondary email address: _____

SEANC District: _____ SEANC Region: _____

Positions held in SEANC district: _____

SEANC District Committees served on: _____

Statewide SEANC Committees served on: _____

JOB INFORMATION

Agency employed by: _____ Position: _____

Years with agency: _____ Department: _____

Work location: _____ Shift hours: _____

Years with State Government: _____ Years of SEANC membership: _____

Please circle any state committees you are interested in serving on this year:

Awards Committee	Benevolence Committee	Bylaws Advisory Board	Connections Committee
Emerging Leaders Committee	EMPAC Statewide Committee	Financial Advisory Committee	Growth & Expansion Committee
Member Discount Committee	Membership Committee	Policy Platform Advisory Board	Statewide Planning Committee
Training Committee	Public Education Committee		

To further assist the President in appointing members to committees, feel free to send a note with more background information.

PLEASE RETURN FORM BEFORE LEAVING CONVENTION