



**Employee Trust Funds Board Election
Educational Support Personnel
Participant Seat
(Public School or Technical College District)
§ 15.16(1)(f)**

Wisconsin Department
of Employee Trust Funds
PO Box 7931
Madison WI 53707-7931
1-877-533-5020 (toll free)
Fax 608-267-4549
etf.wi.gov

The Department of Employee Trust Funds (ETF) supports a diverse and inclusive environment for staff and board members. ETF is seeking a diverse pool of nominees for board vacancies. People identifying with traditionally underrepresented groups — particularly women, people of color, and persons with disabilities — are encouraged to submit their nomination.

To be eligible for this election, a candidate must be an active (currently employed), Wisconsin Retirement System (WRS)-covered educational support employee who is from either a public school district or a technical college district. All of the following must be received by ETF by October 13, 2023:

1. *Candidate Information* form.
2. Biographical information.
3. Nominating petitions (scanned copies are acceptable) of at least 25 signatures of other WRS-covered educational support personnel.
4. Photo (see below for specifications).

Candidate Information Form

Complete the *Candidate Information* form on page 2.

Biographical Information

Submit biographical information of 150 words or less. *If you submit more than 150 words, then only the first 150 words will be published.* Include information you feel will be relevant to your candidacy. Voters will want to know:

- What school districts have you worked for and for how long.
- How long you have been a member of the WRS.
- Any experience in your career or personal life that relates to retirement and benefit issues.

Nominating Petitions

Nominating petitions must contain at least 25 valid signatures of WRS-covered educational support personnel employees. However, we recommend obtaining more than 25 signatures (but no more than 50) in the event we are unable to read some of the signatures during the certification process. You may duplicate the enclosed *Nominating Petition* form (page 3) as many times as you wish.

Photo

Please *email* a “head and shoulders” high resolution digital photo suitable for publication (at least 300 dpi, full color, jpg or png format). This picture, along with the biographical information you supply, will be shared with all eligible voters. Photo *must* be emailed.

Submissions

Email, mail, or submit via drop box, nominating petition forms, candidate information form, and biographical statement to:

ETF Board Liaison
Department of Employee Trust Funds
P.O. Box 7931
Madison, WI 53707-7931
BoardElections@etf.wi.gov

Drop box location: 4822 Madison Yards Way, Madison WI

Deadline

All submissions must be received by ETF by October 13, 2023 at 4:30 p.m.

All candidates will be notified of the status of their petition by November 30, 2023.



Candidate Information
§ 15.16(1)(f)

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Type or print.

| Candidate Information | | | |
|--|------|--------------|-------------------|
| Name (first, middle initial, last) <i>This name will be on the ballot.</i> | | | |
| Address (include apartment, if applicable) | City | State | ZIP code |
| Telephone, including area code (home) | | (cell/other) | |
| Email address | | | |
| School District and Name of School | | | |
| Signature | | | Date (MM/DD/YYYY) |

ETF Contact: ETF Board Liaison
Department of Employee Trust Funds
PO Box 7931
Madison, WI 53707-793
608-266-0301
BoardElections@etf.wi.gov

Note: Eligible candidates for this seat **include** all WRS educational support personnel.



Nominating Petition
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 Educational Support Personnel Seat
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 of Employee Trust Funds
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We, the undersigned, hereby nominate _____ of _____,
(printed candidate name) *(school district and name of school)*

as a candidate in the election for the educational support personnel member who is from either a public school district or a technical college district of the Employee Trust Funds Board for a term of office effective May 1, 2024. We certify that we are educational support personnel who are participating under the Wisconsin Retirement System. We further certify that we have not signed a nomination petition for any other candidate for the aforesaid office.

| Name (first middle last) <i>Print Clearly</i> | Birth Date* (MM/DD) | Employer (Name of public school) | Signature (Must be an original signature) | Date (MM/DD/YYYY) |
|---|-------------------------------|--|---|-----------------------------|
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| 4. | | | | |
| 5. | | | | |
| 6. | | | | |
| 7. | | | | |
| 8. | | | | |
| 9. | | | | |
| 10. | | | | |

*Needed by the Department of Employee Trust Funds to verify your eligibility to sign this petition.

Nominee Certification

I certify that I am an educational support participant of the WRS who is from either a public school district or a technical college district. I further certify that, to the best of my knowledge and belief, the persons signing this petition were, at the time of signing, educational support personnel participants of the WRS. If elected, I agree to serve as a WRS educational support member of the Employee Trust Funds Board effective May 1, 2024, and expiring May 1, 2028, or as determined by statute.

| | |
|------------------|--------------------------|
| Signature | Date (MM/DD/YYYY) |
|------------------|--------------------------|