## Consent to be Nominated for University of Missouri Extension Council Of Greene County

I,	, agree to have my nam	ne submitted in	
nomination as a candidate for an elec	cted position on the University of Missour	i Extension	
Council of Greene County. I underst	and that if I am nominated, I will stand for	r election during	
the third week of January. If elected,	, I agree to serve.		
Name:	Date of Birth:	Date of Birth:	
Address:			
City:	State: Zip _		
Phone:			
E-mail:			
Signature:( <i>If done by e-mail just type in name</i> )	Date submitted		
(i) done by e-man just type in name)			

University of Missouri Extension does not discriminate on the basis of race, color, national origin, sex, sexual orientation, religion, age, disability or status as a Vietnam-era veteran in employment or programs.

My brief bio for the council ballot is as follows:

Return consent form by e-mail to <u>greeneco@missouri.edu</u> or David Burton at <u>burtond@missouri.edu</u> by the third Friday in November or mail this form to: Greene County Extension Center, Springfield-Greene County Botanical Center, 2400 S. Scenic Ave., Springfield, Mo. 65807

(Form created by David L. Burton and last updated 10-27-14)