

Date \_\_\_\_\_  
Directorial District \_\_\_\_\_ Region # \_\_\_\_\_  
**EMAIL, FAX, OR MAIL to CTA/ABC Member and  
EMAIL, FAX, OR MAIL a copy to Regional Political  
Organizer.**

Date of Election: _____
35-Day Deadline Date: _____

**The completed application must be received no later than 35 days before the election. If application is received at the 50 day deadline, no Intent Form is needed. Contact your CTA/ABC Committee member for confirmation of receipt of Application. PLEASE TYPE or PRINT CLEARLY.**

## **APPLICATION FOR CTA/ABC FUNDS for CANDIDATE:** **(School Board/College Board, County Superintendent/County Board)**

### **Part I: Rationale**

Please answer the following questions concerning your chapter's request for financial support. Use a separate sheet for each request. A request for funding for two candidates for the same seat will be rejected.

Name of Chapter: \_\_\_\_\_

Chapter Address: \_\_\_\_\_

State reasons your chapter is requesting CTA/ABC funds: (Please attach any additional information pertinent to this application. **It is suggested a campaign budget be included.**) \_\_\_\_\_

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### **Part II: The Candidate**

1. Candidate's Name: \_\_\_\_\_
2. Amount Requested from CTA/ABC: \_\_\_\_\_ (See Page 2: Part IV, #8)
3. Candidate's Address: \_\_\_\_\_  
\_\_\_\_\_  
(City) (Zip)
4. Occupation: \_\_\_\_\_
5. Campaign FPPC ID#: \* \_\_\_\_\_
6. County of Election: \_\_\_\_\_
7. Campaign Treasurer: \_\_\_\_\_ Phone: \_\_\_\_\_
8. Campaign Name: \_\_\_\_\_
9. Campaign Address: \_\_\_\_\_  
\_\_\_\_\_  
(City) (Zip) Phone: \_\_\_\_\_
10. Is Candidate an incumbent? \_\_\_\_\_
11. List other individual/organization endorsements: \_\_\_\_\_  
\_\_\_\_\_
12. All checks will be mailed to the Chapter Address unless specified here: \_\_\_\_\_  
\_\_\_\_\_

**\*Applications may be submitted but funds cannot be released without this information.**

**PART III: The Campaign**

- 1. How many registered voters eligible to vote in this election? \*\* \_\_\_\_\_
- 2. How many school/college board/seats are open? \_\_\_\_\_
- 3. Number of Incumbents running? \_\_\_\_\_
- 4. Elected: At-large \_\_\_\_\_ By area \_\_\_\_\_ By majority \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_
- 5. Assessment of present School/College Board (check all that apply): Favorable \_\_\_\_\_ Fair \_\_\_\_\_ Divided \_\_\_\_\_  
 Dominated by Administration \_\_\_\_\_ Accessible \_\_\_\_\_ Anti-Association \_\_\_\_\_ Cohesive \_\_\_\_\_ Other \_\_\_\_\_
- 6. Number of Chapter Members? \_\_\_\_\_
- 7. How is the Association actively involved in the campaign: Mailers \_\_\_\_\_ Phone Banks \_\_\_\_\_  
 Media \_\_\_\_\_ Precinct Walking \_\_\_\_\_ Letter/Postcards Mailing \_\_\_\_\_  
 Other (explain) \_\_\_\_\_
- 8. How many chapter members are expected to volunteer? \_\_\_\_\_
- 9. Has a Political Consultant been employed by the campaign? Yes \_\_\_\_\_ No \_\_\_\_\_
- 10. If yes, who? \_\_\_\_\_

**PART IV: Campaign Finances**

- 1. What is the total anticipated budget for this campaign? \_\_\_\_\_ Funding to Date: \$ \_\_\_\_\_
- 2. Is there a local contribution limit? \*\* \_\_\_\_\_ Amount: \$ \_\_\_\_\_
- 3. Does your local association have a PAC? \_\_\_\_\_ 4. How much will it contribute? \$ \_\_\_\_\_
- 5. Amount contributed to date by individual teachers? \_\_\_\_\_ (Not including local PAC funds)
- 6. Total amount of anticipated individual teacher contributions: \$ \_\_\_\_\_ (Not including requested ABC funds)
- 7. Will candidate contribute to the campaign? Yes \_\_\_\_\_ No \_\_\_\_\_ Amount \$ \_\_\_\_\_
- 8. Amount requested from CTA/ABC: \$ \_\_\_\_\_
- 9. How will the CTA/ABC Funds be utilized? \_\_\_\_\_

**PART V: General Information**

- 1. Chapter President's Name: \_\_\_\_\_  
 Phone Numbers: (O) \_\_\_\_\_ (H) \_\_\_\_\_ (C) \_\_\_\_\_  
 Home/Office Fax: \_\_\_\_\_ Home/Office E-Mail: \_\_\_\_\_  
 Chapter Authorized Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_
- 2. Primary CTA Contact Staff: \_\_\_\_\_ Phone: \_\_\_\_\_
- 3. CTA Board Member: \_\_\_\_\_
- 4. CTA/ABC Committee Member: \_\_\_\_\_

SIGNATURES: \_\_\_\_\_ (Date)  
 \_\_\_\_\_ (Chapter President)  
 \_\_\_\_\_ (Date)  
 \_\_\_\_\_ (CTA/ABC Committee Member)  
 \_\_\_\_\_ (Date)