

Directorial District # _____

Date _____

Mail to: CTA/ABC Member for your District

For Information Call: (916) 325-1594

Date of Election _____

35-Day Deadline Date _____

The completed application must be received no later Than 35 days before the election. Contact your ABC Committee member for confirmation of receipt of Application. PLEASE TYPE OR PRINT CLEARLY.

APPLICATION FOR CTA/ABC FUNDS (Candidate: School Board, County Superintendent)

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. **This form is used for school board candidates and superintendent races.**

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.**) _____

Part II: The Candidate

1. Candidate's Name: _____

2. Amount Requested From CTA/ABC: _____ (See Pg 2: Part IV, #8)

3. Candidate's Address: _____

4. Occupation: _____

(City) _____ (Zip) _____
5. Campaign ID#* _____ 6. County of Election: _____

7. Campaign Treasurer: _____ Phone: _____ Fax: _____

8. Campaign Name: _____

9. Campaign Address: _____

(City) _____ (Zip) _____ Phone: _____

10. Is candidate an incumbent? _____ If not, is the incumbent running? _____ 11. Has your chapter formally

endorsed/recommended this candidate? _____ 12. List other individual/organization endorsements: _____

11. All checks will be mailed to the Chapter Address unless specified here: _____

PART III: The Campaign

1. How many registered voters eligible to vote in this election? ** _____ 2. Election Date: _____
3. How many school board position will be filled? _____
4. Number of incumbents running? _____
5. Elected: At-large: _____ By area: _____ By majority: _____
6. Assessment of present School Board (Check all that apply): Favorable _____ Fair _____ Divided _____
 Dominated by Administration: _____ Accessible: _____ Anti Association: _____ Cohesive: _____
 Other: _____
7. Number of Chapter Members? _____
8. How is the Association actively involved in the campaign: Mailers _____ Phone Banks _____ Media _____
 Precinct Walking _____ Letter/Postcards Mailing _____
9. How many chapter members are expected to volunteer? _____
10. Has a Political Consultant been employed by the campaign? _____
11. If so, who? _____

PART IV: CAMPAIGN FINANCES

1. What is the total anticipated budget for this campaign? \$ _____ Funding to date: \$ _____
2. Is there a local campaign contribution limitation for school board candidates? YES _____ NO _____
 If yes, 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. How much has/will the candidate contribute to the campaign? \$ _____
8. Amount requested from CTA/ABC: _____
9. How will the CTA/ABC Funds be utilized? _____

PART V: General Information

1. Chapter President's Name: _____
 (Please Print)
 Phone Numbers: (O) _____ (H) _____ (S) _____
 (Fax) _____ (E-mail) _____
 Chapter Authorized Contact Name: _____ Phone: _____
2. Primary CTA Contact Staff: _____ Phone: _____
3. CTA Board Member: _____
4. CTA/ABC Committee Member: _____

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

*Applications may be submitted but funds cannot be released without this information.
 **Ask your county clerk or registrar of voters.
 7/25/03 Amended by CTA/ABC Committee
 9/10/03 Approved by CTA Board of Directors
 11/30/04 Amended by CTA/ABC Committee
 12/14/04 Approved by CTA Board of Directors