
MISSOURI SILVER HAired LEGISLATURE

CITY OF ST. LOUIS DELEGATION

FOR IMMEDIATE RELEASE

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NOMINATIONS FOR ST. LOUIS CITY SILVER HAired LEGISLATURE REPRESENTATIVES

The Missouri Silver Haired Legislature is an elected body of volunteer Missouri residents who are 60 years of age or older. Their purpose is to advocate and promote legislation that will benefit older residents throughout the state.

The St. Louis Area Agency on Aging is inviting adults age 60 and older who are residents of the City of St. Louis, to submit their names as nominees to represent the City of St. Louis on the Silver Haired Legislature (SHL). When elected, delegates serve a two (2) year term.

A delegate must be able to attend monthly meetings, a three (3) day legislative session in the Fall to Jefferson City, and a one (1) day advocacy trip in the Spring to Jefferson City.

Any individuals interested in serving may nominate themselves or nominations may be made by an organization. Nomination forms may be requested from Anneliese Stoever at the St. Louis Area Agency on Aging, 1520 Market, Suite 4087, St. Louis, Missouri 63103, or by calling her at 657-1669. **The deadline for filing is Wednesday, April 25, 2012.**

Persons who are nominated must be present or have a representative speak on their behalf the day of the election, Wednesday, May 9, 2012, at Five Star Senior Center, 2832 Arsenal, St. Louis, Missouri 63118, at 10am in order to qualify as a candidate.

Shortly after the election, the nominees will receive notification of the results.

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DECLARATION OF CANDIDACY
Missouri Silver Haired Legislature

Election Year: 2012-2013

House and Senate Seats are 2-year terms. I hereby declare my intention to be a candidate for the City of Saint Louis Silver Haired Legislature.

I am at least 60 years of age or older and am a resident of the district for which I am a candidate. I understand the position requires my time, energy and participation throughout the year, including local and regional delegation meetings, trainings, and the Fall Session of the Silver Haired Legislature at the State Capitol. I understand the position may require my testimony at hearings and my willingness to contact legislative staff. The position serves without pay. I fully understand and acknowledge the responsibilities associated with this position and/or have read the Code of Ethics on file with the Area Agency on Aging.

Print Name: _____ Date: _____
Address: _____
Phone: (home) _____ (cell) _____ (work) _____
Email address: _____ Date of Birth: _____

Please state in 100 words or less, your reasons and qualifications for your candidacy, including volunteer and/or advocacy experience. (Attach an additional sheet, if needed)

I grant my permission to the Saint Louis Area Agency on Aging and its delegation to use all or part of the foregoing statement, in promotion of the 2012 Silver Haired Legislature elections. Once elected as a SHL delegate, my personal contact information will be posted on several websites and public directories. By signing this document, I affirm that my name does not appear on the Employee Disqualification List (EDL) and grant permission for this to be verified.

Signature: _____

This completed form must be returned to the St. Louis Area Agency on Aging by mail to: 1520 Market, Room 4086, Saint Louis, MO 63103 or by fax to (314) 612-5915 or by e-mail to stovera@stlouiscity.com by Wednesday, April 25th.