

DECLARATION OF ELIGIBILITY TO HOLD OFFICE (For use only when filling a board vacancy by appointment)

133-Exhibit 2

Waunakee Community School District

Page 1 of 1

WAUNAKEE COMMUNITY SCHOOL DISTRICT

DECLARATION OF ELIGIBILITY TO HOLD OFFICE AS AN APPOINTEE TO THE BOARD OF EDUCATION

This document shall be sworn before a notary or other person who is authorized to administer oaths.

I, _____, being duly sworn, state that

(Print the name of the person wishing to be considered for appointment)

I am willing to be considered for selection to the office of school board member, **insert the seat number or identify the vacant seat's apportioned area, if either is applicable**, as an appointee to fill a vacancy and that I meet the applicable age, citizenship, residency, and voting qualification requirements prescribed by the constitutions and laws of the United States and the State of Wisconsin, and that I will otherwise qualify for the office if I am selected to fill a vacancy on the Board of Education of the Waunakee Community School District.

I further state that I have not been convicted of a felony in any court within the United States for which I have not been pardoned and that I know of no reason that would otherwise make me ineligible to hold the above-identified office.

My present address, including my municipality of residence for voting purposes is:

Town of _____ OR Village of _____ OR City of _____

House or fire no./Street Name

Mailing Municipality and State

Zip code

(Signature of the person, named above, wishing to be considered for appointment)

STATE OF WISCONSIN

County of _____
(County where sworn)

} ss.

Subscribed and sworn to before me this _____ day of _____, 20__.

(Signature of person authorized to administer oaths)

(Printed name)

Notary Public or _____
(Official title, if not a notary)

For a Notary: My commission expires _____ or is permanent **NOTARY SEAL NOT REQUIRED**

Adoption/Revision Dates:

May 2020

Reference: WASB PRG 133 Sample Exhibit 3