

## School Board Member CANDIDATE FILING FORM

I,	, hereby swear (or affirm)that I was born on
(Print or Typ	, hereby swear (or affirm)that I was born on be Name of Candidate)
, tha	(Residence Address of Candidate)
(Date of Birth)	(Residence Address of Candidate)
within Nominating District_	One (1) of the Indian River School District, that I
am qualified to vote in publi	ic school elections within the above named nominating district and
school district, and that I her	eby file as a candidate for school board member in the above
named school district for the	election to be held on N/A.
I furthermore swea	ar (or affirm) that I do not hold a paid position that is subject to the
rules and regulations of the	school board for the above named school district and that I have not
been convicted of embezzle	ment of public money, bribery, perjury or other infamous crime.
Mailing Address if different	than residence address:
Phone (optional): (H)	(W)
F-mail (ontional):	

Please return form (along with letter of interest) via email, mail or fax number listed below: <a href="mailto:jennifer.troublefield@irsd.k12.de.us">jennifer.troublefield@irsd.k12.de.us</a>

Indian River School District Attn: Jennifer Troublefield 31 Hosier Street Selbyville, DE 19975

Fax: 302-436-1007