



PETITION OF NOMINATION AND CONSENT FOR SCHOOL BOARD OFFICE ELECTED IN 2024

(CAN-34)

State Form 47008 (R21 / 8-23)
Indiana Election Division (IC 3-8-2.5; 3-6-12)

COUNTY: _____

INSTRUCTIONS: This petition is used to nominate candidates for school board office. **This petition must be filed with the appropriate county voter registration office not earlier than May 21, 2024 and not later than noon, June 20, 2024.** Petitioners are not required to provide precinct and ward information. Except in cases of disability, the petitioner must complete the information in the petitioner's own handwriting. If assistance is provided due to disability, the assister must complete the affidavit on the reverse of this form. Each candidate must complete the Candidate's Consent on the reverse of this form and file a Statement of Economic Interests (CAN-12 form) with this petition. In a metropolitan school corporation, this petition must be signed by ten (10) registered voters residing in the same board member district as the nominee. (IC 20-23-7-8.1) In a community school corporation, this petition must be signed by ten (10) registered voters residing within the boundaries of the school corporation. (IC 20-23-4-29.1) Additional petition requirements apply in some school corporations. **Consult your attorney to be advised of your rights and responsibilities.**

TO THE _____ COUNTY CIRCUIT COURT CLERK (OR THE LAKE, PORTER, OR TIPPECANOE COUNTY BOARDS OF ELECTION AND REGISTRATION):
Each of the undersigned represents that: 1) the individual resides at the address after the individual's signature as of the date this petition is processed by the county voter registration officials; 2) the individual is a duly qualified registered voter in Indiana; 3) the individual desires to be able to vote for the candidates listed below; and 4) each of the undersigned respectfully requests you to place the following names of the legally qualified candidates for a school board office on the November 5, 2024 General Election Ballot. If the school district is comprised of more than one county, the petition is to be filed with the county containing the greatest percentage of population of the school corporation.

| CANDIDATE NAME | | COMPLETE CANDIDATE ADDRESS <i>(If different from residence, include mailing address.)</i> | OFFICE SOUGHT <i>(Include election district name or number.)</i> |
|----------------|--|--|---|
| 1 | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |

| | SIGNATURE | PRINTED NAME | | DATE OF BIRTH MM/DD/YYYY | RESIDENCE ADDRESS (No P.O. Boxes) | | | CITY or TOWN and ZIP CODE | Office Use Only | |
|----|-----------|--------------|------|-----------------------------|-----------------------------------|--------|-----------|---------------------------|-----------------|-----------|
| | | First | Last | | Number | Street | Apartment | | REG (Y/N) | PCT/ WARD |
| 1 | | | | | | | | | | |
| 2 | | | | | | | | | | |
| 3 | | | | | | | | | | |
| 4 | | | | | | | | | | |
| 5 | | | | | | | | | | |
| 6 | | | | | | | | | | |
| 7 | | | | | | | | | | |
| 8 | | | | | | | | | | |
| 9 | | | | | | | | | | |
| 10 | | | | | | | | | | |

PETITION CARRIER CERTIFICATION *(Must be completed on each petition submitted for filing.)*

I affirm under the penalties for perjury that I have no reason to believe that any individual whose signature appears on this page is ineligible to sign this petition or did not properly complete and sign this page.

_____, 20____
 CARRIER'S SIGNATURE CARRIER'S PRINTED NAME CARRIER'S DATE OF BIRTH (month, day, year) DATE SIGNED BY CARRIER (month, day, year)

 CARRIER'S FULL ADDRESS, INCLUDING ZIP CODE (number and street, city, state, and ZIP code)

Note: Indiana state law does not require a petition carrier to be an Indiana resident or registered voter of Indiana to circulate or gather petition signatures for a candidate. All fields in this certification must be completed before filing with the county closes at noon, June 20, 2024, or the petition is rejected.

CANDIDATE NAME INFORMATION

I request that my name appear on the general election ballot in the following manner as described in IC 3-5-7. I also request that my name on my voter registration record be the same as the name on this declaration of candidacy. (IC 3-8-2-7(c)).

| | | | | | |
|---|--|--|--|---|--|
| | | | | | If a candidate's name does not comply with IC 3-5-7, the declaration may be challenged under Indiana Code 3-8-1-2. A candidate may use a nickname on the ballot only if the nickname is a name by which the candidate is commonly known and does not exceed 20 characters. A candidate may not use a title or degree as a designation or a designation that implies a title or degree. Nicknames are required to be printed on the ballot using parentheses. EXAMPLE: John R. (Jack) Doe |
| First Designation | Second Designation | Third Designation | Fourth Designation | Suffix | |
| This can be: <ul style="list-style-type: none"> • The candidate's legal given name. • The initial of the candidate's legal given name. • The candidate's legal middle name. • The initial of the candidate's legal middle name. • The candidate's nickname. | This can be: <ul style="list-style-type: none"> • The candidate's legal middle name. • The initial of the candidate's legal middle name. • The candidate's nickname. • The candidate's legal surname. | If not used in the first or second designation, this can be: <ul style="list-style-type: none"> • The candidate's nickname. • The candidate's legal surname | If not used in the third designation, this can be: <ul style="list-style-type: none"> • The candidate's nickname. • The candidate's legal surname | Examples: <ul style="list-style-type: none"> • Jr. or III CANNOT be a title or degree like MD, JD | |

CANDIDATE'S CONSENT

I, the undersigned, am a candidate for the office of school board member of _____ .
Insert name of school corporation, including any election district designation.


I give my written consent under IC 3-8-2.5-7 to the circulation and filing of a petition under IC 3-8-2.5 to place my name on the ballot at the general election to be held November 5, 2024, designated as a candidate for this office. I meet all qualifications for this office, including residency requirements and do not have a criminal conviction that would prevent me from serving.

I have been a candidate for a state, legislative, local office, or school board office in a previous primary or general election. Yes No (Check one) (If no, skip next line.)

If yes, I have filed reports required by IC 3-9-5-10 for all previous candidacies. Yes No (Check one)

I am aware of the provisions of IC 3-9 regarding campaign finance and the reporting of contributions and expenditures. I am aware of the requirement to file a campaign finance statement of organization with the appropriate county election board after the first of the following occurs: (1) I receive more than \$500 in contributions as a school board candidate, or (2) I spend more than \$500 in expenditures as a school board candidate. I agree to comply with the provisions of IC 3-9.

I certify that the information in this Declaration of Candidacy is true and complete, and that I meet the specific requirements of this office.

| | | | |
|--|------------------|---|---|
| | | Subscribed and sworn to before this _____ day of _____, 2024. |  |
| Signature | Date Signed | | |
| Telephone | Email (optional) | Signature of Notary Public or Other Official Administering Oath according to IC 33-42-9-7 | |
| Website (optional): | | My Commission Expires (applies only to Notary Public): | |
| NOTE: If the name of more than one candidate is included on the petition, each candidate may attach a copy of the executed consent form above when the petition of nomination is filed. | | County of Residence: | |

AFFIDAVIT OF ASSISTANCE PROVIDED TO PETITIONER(S) WITH DISABILITIES

I affirm under the penalties for perjury that I assisted the following petitioners, due to disability, in writing the petitioner's signature, printed name, and residence address on this petition:

Names of Petitioners Assisted by me: _____, 20____
 DATE ASSISTANCE PROVIDED (month, day, year)

ASSISTER'S SIGNATURE _____ ASSISTER'S PRINTED NAME _____ ASSISTER'S ADDRESS (number and street, city, state, and ZIP code) _____

COUNTY VOTER REGISTRATION OFFICE CERTIFICATION

| | | | | | | | | | | | | |
|---|--|------------------------------------|--|---------------------|----------------------------|------------------------------------|--|---------------------|--|------------------------------------|--|--|
| County Name: | | Number of Valid Signatures: | | County Name: | | Number of Valid Signatures: | | County Name: | | Number of Valid Signatures: | | |
| I certify that, in accordance with IC 3-8-2.5-5, I have reviewed the registration records of the petitioners on this petition and certify the above number to be registered voters of the indicated County. In the case of a school corporation that covers more than one county, the county voter registration official of the containing the greatest percentage of the population of the school corporation certifies petitioners and records the number of valid signatures. Please use the space above to indicate the number of certified signatures for each county in a multi-county jurisdiction, if applicable. | | | | | | | | | | | | |
| Witness my/our hand and seal this ____ day of _____, 2024, at _____, Indiana. | | | | COUNTY SEAL | Signature 1 | | | | <input type="checkbox"/> Clerk of the Circuit Court or <input type="checkbox"/> Member of the Board of Registration (D) | | | |
| | | | | | Signature 2, if applicable | | | | <input type="checkbox"/> Member of the Board of Registration (R) | | | |