

**SAINT PAUL BOARD OF EDUCATION
APPLICATION FOR
APPOINTMENT AS BOARD DIRECTOR**

Name: _____

Home Address: _____ Zip _____

Phone: _____

Email Address: _____

By signing below I represent that I am qualified under the constitution and laws of the United States and the State of Minnesota to seek appointment to the public office indicated above.

- I am eligible to vote in Minnesota.
- I will be 21 years of age or more on April 9, 2026.
- I will have been a resident of the school district from which I seek appointment for at least 30 days before April 9, 2026.
- I have not been convicted of an offense for which registration is required under Minn. Stat. Section 243.166.

(Signature)

(Date)

Before any interview, you must return this signed form. Please return the signed form so it is received no later than **January 30, 2026**. An electronic signature, or email with this information and electronic signature, will be accepted.

It is to be returned to:

Uriah Ward, Chair
Board of Education
Fifth Floor
360 Colborne Street
Saint Paul, Minnesota 55102
uriah.ward@spps.org