

# West Bonner County School District (#83)

## School Board Vacancy Notice

### Zone 5

Due to the resignation of Zone 5 Trustee, the Board of Trustees of West Bonner County School District declared vacancy for Zone 5 on September 25, 2026 and is commencing to fill the seat of the zone, according to Idaho Code 33-504.

The full duties of a Trustee are outlined in Idaho Code 33-512.

**NOTE:** This is not a paid position.

The applicant must:

- Be over 18 years old
- Be a registered voter
- Currently live in Zone 5
- Not be an employee of the West Bonner County School District
- Able to attend a candidate interview
- Attend regularly scheduled meeting and special meetings

The individuals selected to fill these vacancies will serve the balance of the unexpired terms, which end January 2028. (Idaho Code 33-504)

If you meet these qualifications, please submit your completed application packet that consists of the following four (4) items: **Declaration of Candidacy, Petition for Candidacy, Applications Questions, and Resume** to the District Office (134 Main St, Priest River, ID) by 5:00 p.m. November 9, 2026. If you have any questions, please contact Darcie Humphrey, Board Clerk ([darciehumphrey@sd83.org](mailto:darciehumphrey@sd83.org)).

**Application instructions with relevant documents** may be found on the WBCSD website ([www.sd83.org](http://www.sd83.org)) or available at the District Office by October 22, 2026.

FOR MORE INFORMATION, PLEASE CONTACT  
WEST BONNER COUNTY SCHOOL DISTRICT OFFICE

Darcie Humphrey, Board Clerk ([darciehumphrey@sd83.org](mailto:darciehumphrey@sd83.org))  
134 Main St, Priest River, ID 83856  
(208) 448-4439  
Priest River ID 83856



## WEST BONNER COUNTY SCHOOL DISTRICT #83 BOARD OF TRUSTEE VACANCY

### APPLICATION INSTRUCTIONS & QUESTIONS

Please submit your completed application packet that consists of the following four (4) items:

**Declaration of Candidacy, Petition for Candidacy, Applications Questions, and Resume** to the District Office (134 Main St, Priest River, ID) by 5:00 p.m. November 9, 2026. If you have any questions, please contact Darcie Humphrey, Board Clerk ([darciehumphrey@sd83.org](mailto:darciehumphrey@sd83.org)).

**Upon receipt of the candidate's Application Questions, Resume, and Declaration of Candidacy along with the Petition of Candidacy, the WBCSD Board Clerk will:**

1. Verify the qualifications of the Candidate.
1. Verify that the Petition of Candidacy is signed by not less than 5 electors from the zone that is vacant and verify with the County Clerk's Office that the **electors are registered voters within the West Bonner County School District Zone for which the candidate is seeking appointment.**
2. Stamp or write the date and time of receipt on the front of the Declaration of Candidacy and Petition of Candidacy.
3. Provide a copy of the stamped Certification along with a copy of the Declaration of Candidacy to the Candidate.

**West Bonner County School Board of Trustees will schedule a Special Meeting to interview qualified candidates.**

**If more than four (4) completed applications are received for the zone by the specified deadline:**

- The Board shall review all of the qualified completed applications received at a specially called meeting.
- During the Special Meeting, the Board shall select no more than three (3) finalists for a Zone to move to the interview round of the selection process. This will be done through Board action and vote during open session.
- The Board Clerk shall be directed to notify the finalists of their selection and to advise the finalists of the Special Board Meeting date for the interview process.

At a Board Special Meeting, the applicants shall participate in the interview process. **All interviews and deliberations of the Board shall occur in open session of the Board meeting. Through an action item vote in open session, the Board shall select from the finalists to assume the vacancy.**

**WBCSD Zone: 5**

**Date:**

**Name:**

**Day Phone:**

**Evening Phone:**

**Address:**

---

### **APPLICATION QUESTIONS**

- 1. Briefly explain your background: education, employment, community service, etc.**
  
- 2. Briefly explain your philosophy toward public education.**
  
- 3. What do you believe the Board of Trustees' role should be in leading the district?**
  
- 4. In your estimation, how much time do you believe is required to accomplish this role?  
How much time are you willing to commit to serving on the Board of Trustees?**
  
- 5. Do you have business dealing with the West Bonner County School District?**
  
- 6. Do you have relatives that work for the West Bonner County School District?**
  
- 7. If there is other information you would like the Board to consider in reviewing your application, please include it below.**



# SPECIAL DISTRICT OFFICE DECLARATION OF CANDIDACY

Idaho Code 34-701(2) now requires phone numbers to be provided. Idaho Code 34-704(4) states that all information in declarations of candidacy shall be made publicly available upon request.

| CANDIDATE FILING DEADLINES (I.C. 34-1404)          | OFFICE INFORMATION                                                 |  |
|----------------------------------------------------|--------------------------------------------------------------------|--|
| As specified by WBCSD.<br>[REDACTED]<br>[REDACTED] | Filing for the Office of:                                          |  |
| CANDIDATE WITHDRAWAL DEADLINES (I.C. 34-1405A)     | District Name:                                                     |  |
| [REDACTED]<br>[REDACTED] N/A                       | Term length, sub-district, zone, seat or position (if applicable): |  |

| CANDIDATE INFORMATION                                                |      |       |          |                 |
|----------------------------------------------------------------------|------|-------|----------|-----------------|
| Candidate Name (As it appears on your voter registration record.)    |      |       |          | Candidate Phone |
| First                                                                | MI   | Last  | Suffix   |                 |
| Residence Address (As it appears on your voter registration record.) |      |       |          |                 |
| Street Address                                                       | City | State | Zip Code | County          |

| BALLOT NAME                                                          |
|----------------------------------------------------------------------|
| Write your name exactly as you would like it to appear on the ballot |
| N/A                                                                  |

| HOMESTEAD EXEMPTION (I.C. 34-107[2], 34-701[3])                                                                   |      |       |          |        |
|-------------------------------------------------------------------------------------------------------------------|------|-------|----------|--------|
| Have you, or your spouse, claimed a homestead exemption? <input type="checkbox"/> Yes <input type="checkbox"/> No |      |       |          |        |
| If Yes, Please List the Address                                                                                   |      |       |          |        |
| Street Address                                                                                                    | City | State | Zip Code | County |

| CAMPAIGN FINANCE INFORMATION |
|------------------------------|
| [REDACTED]<br>[REDACTED] N/A |

| CERTIFICATION                                                                                                                                                                                                                                                                                                                                                       |                      |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|
| I, the undersigned, being a resident of the State of Idaho and of the District, and, if applicable, the sub-district or zone listed above, do hereby declare myself a candidate for the office entered above to be voted on at the Election to be held on the _____ day of _____, 2023 and I certify that the information on this Declaration is true and accurate. |                      |
| I further certify that I possess the legal qualifications to hold said office. I submit herewith the nominating petition containing the five (5) signatures of qualified electors as statutorily required.                                                                                                                                                          |                      |
| Dated:                                                                                                                                                                                                                                                                                                                                                              | Candidate Signature: |

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Signature: \_\_\_\_\_

Notary Public in and for the State of Idaho, residing at

\_\_\_\_\_

My Commission Expires: \_\_\_\_\_

NOTARY  
SEAL  
HERE



# SPECIAL DISTRICT OFFICE PETITION FOR CANDIDACY

|                                                                                   |                                                                           |  |
|-----------------------------------------------------------------------------------|---------------------------------------------------------------------------|--|
| <b>CANDIDATE FILING DEADLINES</b> (I.C. 34-1404)<br><i>As specified by WBCSD.</i> | <b>OFFICE INFORMATION</b>                                                 |  |
|                                                                                   | <b>Filing for the Office of:</b>                                          |  |
| <b>CANDIDATE WITHDRAWAL DEADLINES</b> (I.C. 34-1405A)                             | <b>District Name:</b>                                                     |  |
| N/A                                                                               | <b>Term length, sub-district, zone, seat or position (if applicable):</b> |  |

|                                                          |
|----------------------------------------------------------|
| <b>CANDIDATE INFORMATION</b>                             |
| <b>Candidate Name</b> (As it will appear on the ballot.) |
|                                                          |

*This petition must be filed in the office of the appropriate political sub-division filing office with the Declaration of Candidacy on or before 5:00 p.m. on the last day of filing for the Election at which you are desiring to participate in. The submitted petition must have affixed thereto the names of at least five (5) qualified electors which reside within the appropriate district or zone.*

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |              |                   |             |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-------------------|-------------|
| <b>SIGNERS STATEMENT</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |              |                   |             |
| I, the undersigned, being a qualified elector of the district and if applicable the sub-district or zone listed above in the State of Idaho, do hereby certify and declare that I reside at the place set opposite my name, and that I join in the petition of the candidate for the office listed above, to be voted for at the election to be held on the _____ day of _____, 2023, and that each for himself says: I have personally signed this petition; I am a qualified elector of the State of Idaho and my residence address is correctly written after my name. |              |                   |             |
| Signature of Petitioner                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Printed Name | Residence Address | Date Signed |
| 1.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |              |                   |             |
| 2.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |              |                   |             |
| 3.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |              |                   |             |
| 4.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |              |                   |             |
| 5.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |              |                   |             |
| 6.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |              |                   |             |
| 7.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |              |                   |             |

|                                                                                                                                                                                                                                                                                                                                                                                                                                  |          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| <b>CERTIFICATION</b>                                                                                                                                                                                                                                                                                                                                                                                                             |          |
| State of Idaho<br>County of _____                                                                                                                                                                                                                                                                                                                                                                                                |          |
| I, _____, being first duly sworn say: That I am a resident of the State of Idaho and at least eighteen (18) years of age: that every person who signed this sheet of the foregoing petition signed his or her name thereto in my presence: I believe that each has stated his or her name address and residence correctly, that each signer is a qualified elector of the State of Idaho, and a resident of the county of _____. |          |
| Circulator Signature:                                                                                                                                                                                                                                                                                                                                                                                                            | Address: |

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Notary Signature: \_\_\_\_\_

Notary Public in and for the State of Idaho, residing at

\_\_\_\_\_

My Commission Expires: \_\_\_\_\_

NOTARY  
SEAL  
HERE