AFFIDAVIT OF QUALIFICATION
FOR
GOVERNING BOARD MEMBER APPOINTMENT

You are hereby notified that I, the undersigned, a **QUALIFIED ELECTOR**, am a candidate for the (School District) Governing Board.

I am a **REGISTERED VOTER** of this state and have or will have been a **RESIDENT** of (School District) for **ONE YEAR** immediately preceding the day of my appointment. Under penalty of perjury, I declare that I have never been convicted of a felony, had my civil rights suspended by a court of law, been declared or adjudicated mentally incompetent, or been subject to registration as a sex offender in this state or in any other jurisdiction (A.R.S. §15-421 C). I further attest that I will not be employed by the District, and if married, neither will my spouse, during my tenure in office.

I do solemnly swear (or affirm) that I am qualified to hold the office that I seek.

My residence address is:

_____
Number & Street City/Town Zip

(_____)_____ _____
Telephone Number Email Address

_____
Date of Birth

My mailing address is:

_____
Number & Street or P.O. Box number City/Town Zip

_____ _____
Printed Name of Candidate Signature of Candidate

Subscribed and sworn (affirmed) to before me this _____ day of _____ 20 ____.

_____
Notary Public

*My commission expires:*_____