

EXHIBIT

Descriptor Code: BBC-E

SCHOOL BOARD APPLICATION FORM

Please complete, date, and sign the application form and statement of interest and return the completed documents to Kayla Schumacher Business Manager.

By submission of this form, your interest in the Glen Ullin District # 48 School Board vacancies will become public.

Name: _____

Address: _____

Phone Number(s): _____

Email address: _____

NOTE: Answers to these questions are not required to serve on the school board but may be used in the school district newsletter or local newspaper publications to inform the public about school board candidates.

1. Why are you interested in serving on the Glen Ullin District # 48 School Board?

2. Describe your experience and involvement with the Glen Ullin District # 48 Public Schools.

3. Do you have children who attend(ed) the Glen Ullin District # 48 Public Schools?

4. What educational, professional, or civic experiences have you had that would contribute to your performance as a member of the Glen Ullin District # 48 School Board?

5. What interests, skills, and abilities would you bring that would benefit the Glen Ullin District # 48 School Board?

6. What do you consider to be three of the most pressing issues facing the Glen Ullin District # 48 School Board?

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7. School/College	Areas of Study

By signing this application I am swearing that, at the time of my appointment, I am a qualified North Dakota elector, meaning that I am:

- A U.S. citizen
- At least 18 years old on the day of an election
- A North Dakota resident
- A resident in the school district for at least 30 days

Any person who is a qualified elector of this state is qualified to be a member of the school board in the district in which the person resides (NDCC § 15.1-07-14).

Glen Ullin District # 48 is also governed by a reorganization plan. Therefore, in order to qualify for this seat, the applicant must reside within the following area: _____.

By signing below, you are certifying that your primary residence is within this area.]

Print Name _____

Signature _____

Date _____

To be completed by a school official

Received by: _____

Date: _____ Time: _____