



City and Borough of Juneau, Alaska Declaration of Candidacy for Board of Education

Municipal Election Date _____

I, _____, hereby declare my candidacy for the office of _____, and agree to serve, if elected, and hereby swear (affirm) that:

- I am a qualified voter as required by law; and
- I am registered to vote in state elections at a residence address within the municipality at least thirty days preceding the date of this election;
- I am a resident of the City and Borough of Juneau and will have been a resident for at least thirty days immediately preceding the date of this election; and
- I am not a candidate for any other office to be voted on at this election and I am not a candidate for this office under any other nominating petition or declaration of candidacy; and
- I am not an employee of the City and Borough of Juneau School District nor a member of the Alaska Legislature; and
- I am not disqualified under Article V of the Alaska Constitution.

In addition to affirming my eligibility and declaration of candidacy, I hereby also submit my requisite Nominating Petition as required by CBJ Code Title 29, and Alaska Public Offices Commission Public Official Financial Disclosure Statement per Alaska Statutes 39.50.

Candidate Name

Name as it should appear on the ballot

Residence Address, City, State, and Zip Code

_____[_____/_____/_____]_____
[Date at which residency began at this address]

Mailing Address, City, State and Zip Code

Primary Phone Number

Alternate Phone Number (optional)

Email Address

Website or Alternative Email Address (optional)

I hereby swear or affirm that the above declaration and all statements contained therein are true and correct.

Signature of Candidate dated this ____ day of _____, 20____.

Subscribed and sworn to or affirmed before me this ____ day of _____, 20____.

SIGNATURE OF NOTARY PUBLIC FOR STATE OF ALASKA

Notary Public Printed Name & Commission Expiration Date



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Please provide an identifier to verify your status as a registered voter. This information will remain confidential.

Name: _____

Identifier (Birth date, voter number, or last four digits of Social Security Number)