## Community College Board Trustee Application for Election

| State of Wyoming ) ss W  | S. 22-22-202                       |  |  |
|--|------------------------------------|--|--|
| County of)   | <b></b>                            |  |  |
| I, the undersigned, swear or affirm that l   | [ was born on(month                | n)(day),(year),                          |  |
| and that I have been a resident of the State of Wyoming since(month/year), and that I am   |                                    |  |  |
| a registered voter of the community college district (and resident of trustee  |                                    |  |  |
| residence area or subdistrict, if any), residing at, in  |                                    |  |  |
| the city/town of   | , and I do herel                   | by request that my name,                 |  |
| , be printed on the official ballot at the next general election   |                                    |  |  |
| as a candidate for the office of Commun  | ity College Board Trustee for a to | erm of years. I hereby                   |  |
| declare that if I am elected, I will qualify for the office.   |                                    |  |  |
| DATED the  | day of, 2                          | 20                                       |  |
|  |                                    |  |  |
| Print or type your name exactly as you wish it to ap<br>on the ballot. (W.S. 22-6-111 states that profession<br>and degrees shall not appear on the ballot. Per Rule | nal titles                         | Signature                                |  |
| 18, fictitious or pseudo names will not be allowed.)   |                                    |  |  |
|  |                                    |  |  |
| Gender: Male Female M  |                                    | uiling City/Town, Zip Code               |  |
|  | Campaig                            | n Telephone (will be published)          |  |
| In order to meet federal requirements for audio ball<br>and to accommodate individuals with disabilities, p<br>print your name phonetically on the line above (i.e.  | olease<br>, Kyle                   | Telephone Number (will not be published) |  |
| Balcaen Wudson would be Ky-ill Ball-Kin Wood-Sin   | E-Mai                              | E-Mail Address (will be published)       |  |
| Filing Period: August 7 through August 26, 2024 at 5:00 PM   | Filing Office: County Clerk        | Filing Fee: None                         |  |
| 5 - 6 - 6 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1  |                                    | 3 112                                    |  |

• Please ensure that:

## Qualifications for Holding Office

- You are not holding an office which may conflict, or be incompatible, with the office for which you are filing.
- O Youremployment is compatible with the office you are seeking.
- Qualified electors must reside in the community college district and in the subdistrict, if the district is divided into subdistricts. (W.S. 22-22-201(b))
- If you have any questions regarding your ability to hold office, please ask the County Clerk for clarification.