## JOINT/BRACKET NOMINATING PETITION FOR ANNUAL SCHOOL ELECTIONS

Certain County Boards of Elections require the use of a county specific nominating petition. Please contact your County Board of Elections for details. TO: , County Clerk of the County. A. NOMINATING STATEMENT: We, the undersigned, are qualified voters of the School District representing (Municipality) in (County), New Jersey. We hereby endorse the following as candidates for membership on the above named Board of Education and we hereby request that the names of said candidates be printed on the official ballot to be used at the ensuing election for the Board of Education to be held , 20 . Term of Office\* 1. Candidate Name\* Residence & Postal Address\* (Select one) # Years Full Term Unexpired Telephone Email\*\* Term 2. Candidate Name\* Residence & Term of Office\* Postal Address\* (Select one) # Years Full Term Unexpired Telephone Email\*\* Term 3. Candidate Name\* Residence & Term of Office\* Postal Address\* (Select one) # Years Full Term Unexpired Email\*\* Telephone Term 4. Candidate Name\* Residence & Term of Office\* **Postal Address\*** (Select one) # Years Full Term Unexpired Email\*\* Telephone Term

| B. DESIGNATION (Optional. No more than three words that convey the principles which the candidates represent, but no designation may contain the name, or a derivative or any part thereof, used as a noun or an adjective, of any political party that is entitled to participate in a primary election.)  C SIGNATORIES: |                                |                                      |           |  |  |
|--|--------------------------------|--------------------------------------|-----------|--|--|
|  |                                |                                      |           |  |  |
| the  |                                | of Education. (At least 25 signature |           |  |  |
| the can  | didate's, are required to nomi | nate a candidate.)                   |           |  |  |
| <u>#</u>   | NAME                           | ADDRESS                              | SIGNATURE |  |  |
| 1.   |                                |                                      |           |  |  |
| 2.   |                                |                                      |           |  |  |
| 3.   |                                |                                      |           |  |  |
| 4.   |                                |                                      |           |  |  |
| 5.   |                                |                                      |           |  |  |
| 6.   |                                |                                      |           |  |  |
| 7.   |                                |                                      |           |  |  |
| 8.   |                                |                                      |           |  |  |
| 9.   |                                |                                      |           |  |  |
| 10.  |                                |                                      |           |  |  |
| 11.  |                                |                                      |           |  |  |
| 12.  |                                |                                      |           |  |  |

| D. AFFIDAVIT:  |  |
|--|--|
| affirmed according to the law on oath, depose of the signers thereof in his/her own handwr and belief, legally qualified to vote at the schominated; and that the petition is prepared of endorsing each candidate and placing the seek election as a member of the Board of E | lator of this nominating petition, being duly sworn or ses and says: The present petition is signed by each riting; the signers are, to the best of my knowledge hool district election for which the candidates are and filed in absolute good faith for the sole purpose candidate's name on the official ballot in order to Education. The circulator further affirms that he/she, and meets the age, citizenship and residency |
| (Circulator's signature)   | (Typed or printed name of circulator)  |
| SWORN OR AFFIRMED AND SUBSCRIEDAY  | BED BEFORE ME THIS  OF, 20   |
| (Affix notary stamp here)  |  |
| Notary Signature  My commission expires  | Printed or typed name of notary  |

## E. NOTICE

All candidates are required by law to comply with the provisions of "The New Jersey Campaign Contributions and Expenditures Reporting Act," *N.J.S.A.* 19:44A-1 *et seq.* For further information, please call the Election Law Enforcement Commission, (609) 292-8700.

| F. CANDIDATE'S ACCEPTANCE/O   | ATH OF ALLEGIAN           | CE                                 |  |  |  |
|---|---------------------------|------------------------------------|--|--|--|
| , a candidate for membership of the board of education named in the foregoing petition, do hereby certify that I am qualified to be a member of the |                           |                                    |  |  |  |
|   |                           |                                    |  |  |  |
| ·   |                           | stand as a candidate for election  |  |  |  |
| and, if elected, agree to accept and qualif   |                           |                                    |  |  |  |
| disqualified as a voter pursuant to N.J.S.A   | 1. 19:4-1, nor have I bee | en convicted of a disqualifying    |  |  |  |
| crime pursuant to N.J.S.A. 18A:12-1.  |                           |                                    |  |  |  |
| I further do solemnly swear (or affirm) th  | at I will support the Co  | nstitution of the United States    |  |  |  |
| and the Constitution of the State of New.   | Jersey and that I will be | ar true faith and allegiance to    |  |  |  |
| the same and to the Governments establis  | hed in the United States  | s and in this State, under the     |  |  |  |
| authority of the people. So help me God.  |                           |                                    |  |  |  |
|   |                           |                                    |  |  |  |
| Candidate Signature   | Printed                   | Printed or typed name of candidate |  |  |  |
| SWORN OR AFFIRMED AND SUBSCI  | RIBED BEFORE ME T         | THIS                               |  |  |  |
| DA  | Y OF                      | , 20                               |  |  |  |
| (Affix notary stamp here)   |                           |                                    |  |  |  |
| (122222   |                           |                                    |  |  |  |
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|   |                           |                                    |  |  |  |
|   |                           |                                    |  |  |  |
|   |                           |                                    |  |  |  |
| Notary Signature  | printed o                 | or typed name of notary            |  |  |  |
| My commission expires   | , 20                      |                                    |  |  |  |