

**SCHOOL BOARD APPLICATION FORM**

Please complete, date, and sign the application form and state of interests and return the completed documents to DeeAnn Bilben, Business Manager at 415 1<sup>st</sup> Ave SE, Hankinson, ND 58041 or by e-mail to: [deeann.bilben@k12.nd.us](mailto:deeann.bilben@k12.nd.us) by 4:00 p.m., Thursday, July 14, 2022.

By submission of this form, your interest in the Hankinson School Board vacancy 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 Hankinson School Board?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Describe your experience and involvement with the Hankinson Public School.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. What educational, professional, or civic experiences have you had that would contribute to your performance as a member of the Hankinson School Board?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. What interests, skills, and abilities would you bring that would benefit the Hankinson School Board?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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5. What do you consider to be three of the most pressing issue facing the Hankinson School Board?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. 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).

The Hankinson Public School is also governed by state law. Therefore, in order to qualify for this seat, the applicant must reside within the Hankinson Public School District. By signing below, you are certifying that your primary residence is within the Hankinson Public School District.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**To be completed by a school official**

\_\_\_\_\_  
Received by: \_\_\_\_\_

Date: \_\_\_\_\_

Time: \_\_\_\_\_