

# State of Delaware Department of Elections

## **School Board Candidate Filing Packet 2025**

# School Board Candidate Filing Deadline: Friday, March 7, 2025, 4:30 p.m.

#### **Department of Elections, New Castle County Office:**

Carvel State Office Building, 820 N French St., Suite 400, Wilmington, DE 19801 Phone: (302) 577-3464 Fax: (302) 577-6545

Email: votencc@delaware.gov

#### **Department of Elections, Kent County Office:**

100 Enterprise Place, Suite 5, Dover, DE 19904 Phone: (302) 739-4498 Fax: (302) 739-4515 Email: <u>votekc@delaware.gov</u>

#### **Department of Elections, Sussex County Office:**

119 N Race Street, Georgetown, DE 19947
Phone: (302) 856-5367 Fax: (302) 856-5082
Email: votesc@delaware.gov

#### Department of Elections, Office of the State Election Commissioner:

905 S Governors Ave, Suite 170, Dover, DE 19904 Phone: (302) 739-4277 Fax: (302) 739-6794

Email: coe\_vote@delaware.gov

### Department of Elections Website:

https://elections.delaware.gov



Campaign Finance Reporting System:

https://cfrs.elections.delaware.gov



Department of Elections Voter Portal:

Register to Vote, Request an Absentee Ballot & More:

https://ivote.de.gov



Find your districts, and navigate interactive district maps:

https://gis.elections.delaware.gov

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*Please note the Department of Elections does not	
have the authority to regulate sign placement. We are	
providing this information as a relevant and helpful	
resource for candidates.	25 - 29



### **Overview of School Board Candidate Filing Process**

- The filing deadline for School Board elections is the first Friday in March at 4:30 p.m.
- School Board members elected to full school board terms after December 31, 2021, are four (4) years, per the provisions of HB92.
- School Board Qualifications:
  - Must be a citizen of the United States and Delaware and live in the school district
  - Must be 18 years of age or older at the time of the election
  - Must live in the nominating district for which he/she is a candidate
  - o Cannot be a paid employee of the district subject to rules & regulations of the board
  - Must never have been convicted of embezzlement

### How to file:

- File a completed Candidate Filing Form and a Delaware Child Protection Registry Consent Form with the Department of Elections no later than 4:30 p.m. on the first Friday in March in the year of the election. At the time of filing, a candidate shall submit a check for \$14.00 payable to State of Delaware for the cost of the Delaware Child Protection Registry clearance check.
- Child Protection Registry Checks are completed by the Department of Elections, following submission to the Department by the candidate of their completed Delaware Child Protection Registry Consent Form.
- The filing form must be notarized. The Department will notarize your form if you choose to file in person at the Department's office.
- Obtain a criminal background check and Child Protection Registry check under Section 309 of Title 31 of the Delaware Code, through the State Bureau of Identification (SBI), in accordance with Section 209(b) of Title 14 of the Delaware Code. mtg
- An individual seeking election to a school board is not considered an "official" candidate until (1) the individual files a completed, notarized filing form that is accepted by the Department of Elections; and (2) the Commissioner of Elections determines that an individual is qualified under 14 Del. C. § 209 (criminal background check and Delaware Child Protection Registry check) and under 14 Del. C. § 1052 (citizenship and residency requirement), as required under 14 Del. C. § 1075. A candidate's name will be added to the Department's online "filed school board candidates" list only after such determinations are made by the Commissioner of Elections, and the individual's candidacy filing date will be noted as the date the filing form was first submitted to the Department of Elections.
- Complete and submit a <u>Certificate of Intention</u> to the State Election Commissioner.
- A candidate may withdraw by filing a <u>Withdrawal Form</u> to the Department of Elections before
  the date of the election. The withdrawal form must be notarized. The Department will notarize
  your form if you choose to withdraw in person at the Department's office.

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#### Information regarding Background Check and Child Protection Registry Check Requirements for School Board Candidates

Pursuant to Section 209(b) of Title 14 of the Delaware Code, before I may be appointed to or qualify as a candidate for membership on the State Board of Education or the board of a public school district or vocational-technical school district, I must obtain a fingerprinted Delaware and national criminal background check and Child Protection Registry (CPR) check under Section 309(a) of Title 31 of the Delaware Code.

At the time of school board candidate filing, candidates will be considered *provisional* candidates and the candidate will be posted with the status of "provisional" in the listing of candidates on the Department's website.

Pursuant to 14 *Del. C.* § 209, the State Election Commissioner will receive and review each individual candidate's completed State of Delaware and Federal Criminal History background check and their CPR check and determine whether an individual is qualified for election for the office of school board member. Once the Commissioner has determined a candidate is *qualified*, the Department will change the candidate's status from "provisional" to "qualified" on the candidate list on the Department's website, and the candidate filing will be considered official, and the candidate qualified for the office of school board member.

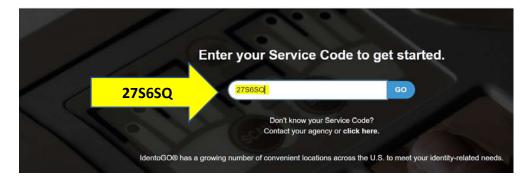
Information on obtaining a Delaware and Federal criminal history background check is available on the Delaware State Police website, <a href="https://dsp.delaware.gov/obtaining-a-certified-criminal-history/">https://dsp.delaware.gov/obtaining-a-certified-criminal-history/</a>.

There are **9 locations** statewide serving individuals who need to obtain a criminal history background check. When an individual makes an appointment, they may choose from any of the available locations.

The fee for a certified State of Delaware and Federal Criminal History is **\$85.00**. Please note that the Department cannot accept this payment on behalf of the SBI.

SBI encourages individuals to make an appointment online at <a href="https://uenroll.identogo.com">https://uenroll.identogo.com</a>. On the portal, enter the Department of Elections Service Code, **2756SQ** in the "Enter Code" field:





Once an individual has made an appointment, SBI will email the individual confirming the appointment.

PLEASE NOTE: Individuals who do not have access to the internet may call SBI to schedule an appointment at 1-866-761-8069. Candidates may make the call to schedule their appointment for a Delaware and Federal criminal history background check.

Please see the IdentoGo Fingerprint Service Code Form on the next page for criminal history background check appointment information for school board candidates.



Service Name: Public School Employment – School Board Candidate

To Schedule your ten-minute fingerprint appointment, simply visit <a href="https://uenroll.identogo.com">https://uenroll.identogo.com</a> and enter the following Service Code

27S6SQ

Service Code is unique to your hiring/licensing agency. **Do not use this code for another purpose**.

Please bring one of the identification documents from the list below to your enrollment appointment. Identification must be valid, not expired, and contain a photograph of the applicant.

- Driver's License issued by a State or outlying possession of the U.S.
- Driver's License PERMIT issued by a State or outlying possession of the U.S.
- Driver's License PAPER/TEMPORARY issued by a State or outlying possession of the U.S.
- Enhanced Driver's License (EDL)
- Commercial Driver's License issued by a State or outlying possession of the U.S.
- Commercial Driver's License PERMIT issued by a State or outlying possession of the U.S
- ID card issued by a federal, state, or local government agency or by a Territory of the United States
- Enhanced Tribal Identification Card (for federally recognized U.S. tribes)
- Department of Defense Common Access Card
- Uniformed Services Identification Card (Form DD-1172-2)
- U.S. Military Identification Card
- U.S. Coastguard Merchant Mariner Card
- Military Dependent's Identification Card
- U.S. Passport
- > Foreign passport
- Permanent Resident Card or Alien Registration Receipt Card (Form I-551)
- Employment Authorization Card/Document (I-766) that contains a photograph
- Canadian Driver's License
- Foreign Driver's License (Mexico and Canada Only)
- > U.S. Visa issued by the U.S. Department of Consular Affairs for travel to or within, or residence within, the United States

Name Linking Documents (only needed if name on identification does not match name in registration):

 Original or Certified Copy of a Court Ordered Name Change Document (to include marriage certificates and divorce decrees)



Don't have access to the Internet? You can still schedule an appointment by calling 866.761.8069.



# School Board Member CANDIDATE FILING FORM

l,	_, hereby swear (or affirm) that I was born on
(Print or Type Name of Candidate)	
, that I reside at	
(Date of Birth)	(Residence Address of Candidate)
within Nominating Districtof the(If Required) (N	School District, that ame of School District)
am qualified to vote in public school elections within	the above-named nominating district and
school district, and that I hereby file as a candidate for	or school board member in the above
named school district for the election to be held on _	(Date of Election)
I furthermore swear (or affirm) that I do not rules and regulations of the school board for the about been convicted of embezzlement of public money, be	ve-named school district and that I have not
I acknowledge and understand that in acthe Delaware Code, before I may be appointed to on the State Board of Education or the board technical school district, I must obtain a fing background check and Child Protection Registry the Delaware Code.	of a public school district or vocational erprinted Delaware and national crimina
This Candidate Filing Form will not be deemed of Candidate's signature is notarized below.	complete or submitted unless the
(Signature of Candidate)	(Date)
	Sworn to and subscribed before me this
	day of,,
	NOTARY PUBLIC
For Office Us	e Only
Descrived by	Deter

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### **School Board Candidate Contact Information Form**

Candidate: Please complete the information below and indicate whether you would like your information posted to the Department's website for voter information. If you choose not to have the information published on our website, your information will only be used for internal communications between you and the Department.

communications between you and the Department.
Residential Address
Residential
Address
Would you like your residential address published on the
Would you like your residential address participed on the
Department's website?
Mailing Address
Mailing Address
Would you like your mailing address published on the Department's YES NO
website?
Email Addresses
Email Address #1
The state of the foundation of the production of
website?
Email Address #2
Would you like your email address #2 published on the Department's YES NO
website?
Phone Numbers
Phone Number
#1
Would you like your phone number #1 published on the Department's YES NO
website?
Phone Number
#2
Would you like your phone number #2 published on the Department's YES NO
website?
Candidate Website URL
Website Website
1100 D
Would you like your website URL published on the Department's YES NO
website?



## School Board Member CANDIDATE BALLOT NAME FORM

Candidate Name as it appears on 2025 School Board Candidate Filing Form:

RE: 2025 School Board Elections

#### Dear Candidate:

The Department wishes to confirm how you would like your name to appear on the ballot. Please be advised that candidate names will not appear on the ballot with a Title (e.g., Dr., Col., Esq., etc.) either preceding or following their name. Below are your options (you may only choose one of the following by marking an "X" in the space provided):

If you want your name to appear on the ballot exactly as it appears on your 2025 School Board Candidate Filing Form.
You may request a shortened form of your full name appear on the ballot. For example, if your full name is <b>Elizabeth Mary Doe</b> , you may request <b>Elizabeth M. Doe</b> or <b>E. Mary Doe</b> appear on the ballot.
If you regularly conduct business and are recognized in the community by that name, you may request that name appear on the ballot. For example, if your name is <b>William Doe</b> and you are known in your business dealings and in the community as Bill, you may request <b>Bill Doe</b> appear on the ballot.
If you generally use or are generally known by a nickname that is a generally recognized shortened version of your legal name, you may request that nickname appear with your name on the ballot. For example, if your full name is <b>Elizabeth Doe</b> , and you generally use Lisa as a nickname, you may request <b>Elizabeth "Lisa" Doe</b> appear on the ballot.
You may request a derivation of your name appear on the ballot. For example, if your full name is <b>Bernard Doe</b> , you may request <b>Bernie Doe</b> appear on the ballot.

If you wish your name to appear on the ballot differently than it appears on your Candidate Filing Form **within the options described above**, please print it clearly below, review the certification, sign below, have your signature notarized, and return an original executed copy to the Department in person or by mail. No electronic submissions will be accepted.

Please return this form as soon as possible. We must receive your request no later than 4:30PM on March 7, 2025. If we do not receive your completed form by this deadline, your name will appear on the ballot(s) as it appears on your 2025 School Board Candidate Filing Form.

[OVER]



Requested Ballot Name (print clearly	y below):
	ion (print clearly below): nto syllables, CAPITALIZE the part of your name that you sh marks (-) between the parts of your name.
the Department of Elections, I certify ( accurately; and (2) that this request is my identity, or for any other improper of Elections may require me to make a sa	tion above, and by completing and returning this request to 1) that I have completed this request truthfully and not made to defraud or mislead the public, to misrepresent or illegal purpose. I understand that the Department of atisfactory showing to support the option that I have ent may reject this request at its discretion if a satisfactory
CANDIDATE NAME and OFFICE SOU  This form will not be deemed complete or soundarized below.	JGHT (print clearly) submitted unless the Candidate's signature is
Sign	nature of Candidate
	Sworn to and subscribed before me this
	day of,
	NOTARY PUBLIC
For Off	fice Use Only
Received by:	Date:

# DSCYF Department of Services for Children, Youth & Their Families

**PART I - APPLICANT INFORMATION** 

### DELAWARE CHILD PROTECTION REGISTRY CONSENT FORM

### **Web Portal**



Request must be within 90 days of signature date in order to be processed

Name (Last*, First*, Middle):
Other Name(s) used/Alias:
Social Security #:
Date of Birth (mm/dd/yyyy)*:
Gender*:
Race:
Ethnicity: (Hispanic/Non-Hispanic)
Address (Street, City, State, Zip):
Are you on the Delaware Child Protection Registry for any substantiated cases of child abuse/neglect? Yes No
If yes, explain:
I hereby authorize The Delaware Department of Services for Children, Youth and Their Families to provide the below named requester(s) with all substantiated cases of child abuse or neglect concerning me that are active on the Delaware Child Protection Registry. I further release the Delaware Department of Services for Children, Youth and Their Families, its officers and employees from any and all claims arising out of on in any way connected to the release or dissemination of any information concerning me.
Signature:
Date:
Parent/Guardian Signature (If applicant is under the age of 18):
PART II - REQUESTER INFORMATION
Check one option below and complete required information*:
1. Agency Request – Agency Name*:
2.   Individual Request – Self
3.   Individual Request – Share Results with Requesting Agency
Requesting Agency 1 – Agency Name*:
Requesting Agency 2 – Agency Name*:
Requesting Agency 3 – Agency Name*:
Requesting Agency 4 – Agency Name*:
Requesting Agency 5 – Agency Name*:
* Mandatory (Agency Name is Mandatory.)

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# State of Delaware Department of Elections

### **Overview of School Board Candidate Campaign Finance Filing Requirements**

Compensation & Campaign Fundraising and Expenditures	Certification of Intention Required	Statement of Organization for Candidate Committee Required
Compensation for school board member is less than \$1,000 annually <u>and</u> the candidate <b>does not</b> intend to spend or receive more than \$5,000 in campaign funds from the date of the first contribution or expenditure through the end of the calendar year of his/her election	X	
Compensation for school board member is less than \$1,000 annually <u>and</u> the candidate <b>does</b> intend to receive more than \$5,000 for campaign expenses or expend more than \$5,000 on campaign expenses during the campaign		X
Compensation for school board member is more than \$1000 annually <u>and</u> the candidate <b>does not</b> intend to receive more than \$5,000 for campaign expenses or expend more than \$5,000 on campaign expenses during the campaign	X	
Compensation for school board member is more than \$1,000 annually <u>and</u> the candidate <b>does</b> intend to receive more than \$5,000 for campaign expenses or expend more than \$5,000 on campaign expenses during the campaign		X

### How to File a Certification of Intention:

Visit: https://cfrs.elections.delaware.gov

- Select: Certification of Intention
- Complete the application
- Print, sign and mail the completed Certification of Intention to:

Delaware Department of Elections
Office of the State Election Commissioner

ATTN: Campaign Finance

905 S. Governors Avenue, Suite 170

Dover, DE 19904

### How to file a Statement of Organization:

- Visit: <a href="https://cfrs.elections.delaware.gov">https://cfrs.elections.delaware.gov</a>
- Select: Register a Candidate Committee
- Complete the registration
- Print the completed Statement of Organization, sign and have notarized, and mail to:

Delaware Department of Elections
Office of the State Election Commissioner

ATTN: Campaign Finance

905 S. Governors Avenue, Suite 170

Dover, DE 19904

# Candidate for School Board Member CANDIDATE INFORMATION SHEET

- The information provided by a candidate on the *Candidate Filing Form* is public information and is subject to public disclosure under the Delaware Freedom of Information Act.
- Each candidate on the ballot may authorize persons **in writing** to serve as challengers and observe the election in the various polling places. One Challenger representing each candidate may be present in each polling place. Challengers may be replaced during the day and may serve as a Challenger in more than one polling place during the election. A Challenger may challenge a voter for cause. The Inspector and both Judges hear the challenge and decide, by majority vote, whether to permit the person to vote. A Challenger who disrupts the activities in the polling place may be asked to leave the polling place. A Challenger may view the Polling Place records and voting machine's vote count but may not interfere with the voting process when doing so.
- Electioneering is not permitted within the polling place or within 50 feet of any of the entrances to the polling place. See Section 4942 of Title 15 of the Delaware Code for details.
- The following persons are permitted in the voting room: Department of Elections staff with identification; the State Election Commissioner and his staff with identification; authorized challengers; the assigned Election Officers; persons voting or waiting to vote; a child or children aged 17 or below accompanying a voter; and a person or persons assisting a voter (may not be a representative of the person's employer or union).
- A candidate on the ballot or a candidate's authorized challenger may be present to observe the setup of the polling place and the closing of the polls.
- A candidate may request a recompilation of the vote by presenting a petition signed by 25 or more persons who voted in the election within 96 hours of the certification of the election if the difference in the election was the larger of 10 votes or  $\frac{1}{2}$  of 1% of the total vote.
- Candidates may withdraw by submitting the *Withdrawal Form* to the Department of Elections conducting the election.
- The offering by a person of anything of value to another person to vote or to vote in a particular manner is prohibited by law. Similarly, a person may not accept anything of value for voting or for voting in a particular manner.
- Candidates should contact the County Office of the Department of Elections conducting the election for information regarding where the votes will be tallied following the election and where and when the election will be certified.
- Candidates should contact the County Office of the Department of Elections conducting the election for other information regarding the conduct of the election.

Please submit your completed form with payment, if applicable, to your County's Elections Office.

Full Name:  Residential Address:  Phone: Email:  Description (Specify details of your request):  2. Requestor Type (Select one)  Major/Minor Political Party	1. Requestor			
Phone: Email:  Description (Specify details of your request):  2. Requestor Type (Select one)  Major/Minor Political Party General Assembly; State Agencies; County or Local Government  3. Organization Information (Required when requesting on behalf of an organization)  Name of Entity:  Address:  Phone: Company Contact:  4. Delivery Information (Select one)  Map Type Cost County-wide map \$10 per map District-level map \$3 per map  **Ishipping cost is subject to change.  5. Payment Information (Select one)  Total Cost: (Includes shipping, if applicable) General Notes (Read Notes)  Allow up to 10 business days upon receipt of request Limit of 1 active request of no more than 3 maps at a time.  7. Affirmation (Read Statement and Sign Oath)  Is wear or affirm, under penalty of perjury, that: The map(s) received as part of this request will not business on a part of this request will not business on a part of this request will not business on a part of this request will not business or republish or republish the information in a way that allows it to be used in that manner.	Full Name:			
Description (Specify details of your request):  2. Requestor Type (Select one)  Major/Minor Political Party	Residential Address:			
2. Requestor Type (Select one)  Major/Minor Political Party	Phone:	Email:	1	
O Major/Minor Political Party	Description (Specify deta	ils of your request):		
O Major/Minor Political Party				
Major/Minor Political Party				
General Assembly; State Agencies; County or Local Government  3. Organization Information (Required when requesting on behalf of an organization)  Name of Entity:  Address:  Phone: Company Contact:  4. Delivery Information (Select one)  Map Type Cost County-wide map \$10 per map  District-level map \$3 per map  District-level map \$3 per map  1-Shipping cost is subject to change.  5. Payment Information (Select one)  Total Cost: (includes shipping, if applicable)  O Check# (Payable to State of Delaware) O Cash (In person submission only)  Money Order # No Cost <sup>2</sup> 6. Ordering Notes (Read Notes)  • Allow up to 10 business days upon receipt of request • Limit of 1 active request of no more than 3 maps at a time.  7. Affirmation (Read Statement and Sign Oath)  I swear or affirm, under penalty of perjury, that: • The map(s) received as part of this request will not be used for commercial solicitation or for any other purpose not related to the electoral process, or make the information available to the public or third parties or publish or republish the information in a way that allows it to be used in that manner.	2. Requestor Type (Se	elect one)		
Name of Entity:  Address:  Phone: Company Contact:  4. Delivery Information (Select one)  Map Type Cost County-wide map \$10 per map District-level map \$3 per map  **Shipping cost is subject to change.  5. Payment Information (Select one)  Total Cost: (includes shipping, if applicable) Check# (Payable to State of Delaware) Money Order #  **Ordering Notes (Read Notes) Allow up to 10 business days upon receipt of request Limit of 1 active request of no more than 3 maps at a time.  7. Affirmation (Read Statement and Sign Oath) I swear or affirm, under penalty of perjury, that:  **The map(s) received as part of this request will not be used for commercial solicitation or for any other purpose not related to the electoral process, or make the information available to the public or third parties or publish or republish the information in a way that allows it to be used in that manner.		,		•
Address:  Phone: Company Contact:  4. Delivery Information (Select one)  Map Type Cost County-wide map \$10 per map District-level map \$3 per map  1 Shipping cost is subject to change.  5. Payment Information (Select one)  Total Cost: (Includes shipping, if applicable) Check# (Payable to State of Delaware) Money Order # No Cost  6. Ordering Notes (Read Notes) Allow up to 10 business days upon receipt of request Limit of 1 active request of no more than 3 maps at a time.  7. Affirmation (Read Statement and Sign Oath) I swear or affirm, under penalty of perjury, that:  • The map(s) received as part of this request will not be used for commercial solicitation or for any other purpose not related to the electoral process, or make the information available to the public or third parties or publish or republish the information in a way that allows it to be used in that manner.	3. Organization Infor	mation (Required w	hen request	ing on behalf of an organization)
### Company Contact:  ### A. Delivery Information (Select one)    Map Type	Name of Entity:			
### Ap Type   Cost   County-wide map   \$10 per map	Address:			
Map Type Cost County-wide map \$10 per map District-level map \$3 per map  Ishipping cost is subject to change.  5. Payment Information (Select one)  Total Cost: (Includes shipping, if applicable) Check# (Payable to State of Delaware) Money Order # No Cost  6. Ordering Notes (Read Notes) Allow up to 10 business days upon receipt of request Limit of 1 active request of no more than 3 maps at a time.  7. Affirmation (Read Statement and Sign Oath) I swear or affirm, under penalty of perjury, that: I the map(s) received as part of this request will not purpose not related to the electoral process, or make the information available to the public or third parties or publish or republish the information in a way that allows it to be used in that manner.	Phone:	Compai	ny Contact:	
County-wide map \$10 per map  District-level map \$3 per map  **Ishipping cost is subject to change.**  **Total Cost:	4. Delivery Information	on (Select one)		
County-wide map \$10 per map  District-level map \$3 per map  **Ishipping cost is subject to change.**  **Shipping cost is subject to change.**  **Total Cost:	Man Type	Cost	O Pick up	Ship to (plus \$6.70 standard shipping cost <sup>1</sup> ):
District-level map \$3 per map  **Ishipping cost is subject to change.**  **Total Cost: (includes shipping, if applicable)  **Check# (Payable to State of Delaware)				
5. Payment Information (Select one)  Total Cost: (includes shipping, if applicable)  Check# (Payable to State of Delaware)				
Total Cost:	<sup>1</sup> Shipping cost is subject to	change.		
Total Cost:				
Check#(Payable to State of Delaware)	-			
<ul> <li>Money Order # O No Cost²</li> <li>6. Ordering Notes (Read Notes)</li> <li>Allow up to 10 business days upon receipt of request</li> <li>Limit of 1 active request of no more than 3 maps at a time.</li> <li>7. Affirmation (Read Statement and Sign Oath)</li> <li>I swear or affirm, under penalty of perjury, that:</li> <li>The map(s) received as part of this request will not be used for commercial solicitation or for any other purpose not related to the electoral process, or make the information available to the public or third parties or publish or republish the information in a way that allows it to be used in that manner.</li> </ul>	Total Cost:	(includes shippir	ng, if applicable)	_
<ul> <li>6. Ordering Notes (Read Notes)</li> <li>Allow up to 10 business days upon receipt of request</li> <li>Limit of 1 active request of no more than 3 maps at a time.</li> <li>7. Affirmation (Read Statement and Sign Oath)</li> <li>I swear or affirm, under penalty of perjury, that: <ul> <li>The map(s) received as part of this request will not be used for commercial solicitation or for any other purpose not related to the electoral process, or make the information available to the public or third parties or publish or republish the information in a way that allows it to be used in that manner.</li> </ul> </li> </ul>			ware)	
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<ul> <li>7. Affirmation (Read Statement and Sign Oath)</li> <li>I swear or affirm, under penalty of perjury, that:</li> <li>The map(s) received as part of this request will not be used for commercial solicitation or for any other purpose not related to the electoral process, or make the information available to the public or third parties or publish or republish the information in a way that allows it to be used in that manner.</li> </ul>			request	
I swear or affirm, under penalty of perjury, that:  The map(s) received as part of this request will <b>not</b> be used for commercial solicitation or for any other purpose not related to the electoral process, or make the information available to the public or third parties or publish or republish the information in a way that allows it to be used in that manner.	·		•	e.
• The map(s) received as part of this request will <u>not</u> be used for commercial solicitation or for any other purpose not related to the electoral process, or make the information available to the public or third parties or publish or republish the information in a way that allows it to be used in that manner.			<u> </u>	
<ul> <li>The information on this form is true, accurate, and complete to the best of my knowledge. I understand that a material misstatement of fact in completion of this document may constitute grounds for conviction of perjury.</li> </ul>				

<sup>2</sup> Maps are provided at no charge to the General Assembly; State Agencies; County or Local Government; Major Political Party; any Minor Political Party eligible to place candidates on the ballot; Candidates will receive one (1) complimentary map at the time they file for office, fees may be applied for additional copies.

https://ivote.de.gov

DMFM001 v2.0 2021/05/07

Sign here

Email: votekc@delaware.gov

Today s date

(MM/DD/YYYY)

Sussex County Office
119 N Race St
PO Box 457
Georgetown DE 19947
Page 136 9 86-736 of 29
Factor 136 9 86-736 of 29

Email: votesc@delaware.gov

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FC	OR OFFICE USE ONLY
Amount Paid:	Rec. By:
CFID #:	IRTS #:

1. Requestor		
Full Name:		Phone:
Residential Address:		
2. Requestor Type (Select one)		
O Major/Minor Political Party	O Candidate	O Public
O General Assembly; State Agencie	es; County or Local Governme	ent
3. Requested Data (Select one)		
O Statewide O Other Specify	:	
4. File Format (Select one)		
○ Tab-Delimited Text File (TXT)	O Comma-Separated Value	es (CSV)
5. Organization Information (Re	quired when requesting on be	ehalf of an organization)
Name of Entity:		Phone:
Address:		Company Contact:
6. Delivery Information		
Email Address:		
Important: Data will be sent via s	ecure email. Visit https://de.g	gov/securemail for more information.
7. Payment Information (Cost is	\$25.00 per request. Select or	ne payment option)
O Check #	(Payable to State of Delaware)	O Cash (In person submission only)
O Money Order #		O No Cost (See Title 15, Chapter 3, §304(e))

### 8. Ordering Notes (Read Notes)

- Allow up to 10 business days upon receipt of request Limit of 1 active request at a time
- Delaware Code, Title 15, Chapter 3, §304(h): Files and lists provided to members of the General Assembly and State agencies or county or local governments pursuant to subsection (f) of this section shall include voter names, addresses, political party affiliation, voting history, telephone numbers, and dates of birth. Files and lists provided to major and minor political parties pursuant to subsections (a) through (d) of this section and to candidates for elective office pursuant to subsection (e) of this section shall be limited to voter names, addresses, political party affiliations, voting history, legislative district information, telephone numbers, and years of birth. Files and lists provided to the public shall be limited to voter names, addresses, political party affiliations, voting history, legislative district information, and years of birth.

### **9. Affirmation** (Read Statement and Sign Oath)

I swear or affirm, under penalty of perjury, that:

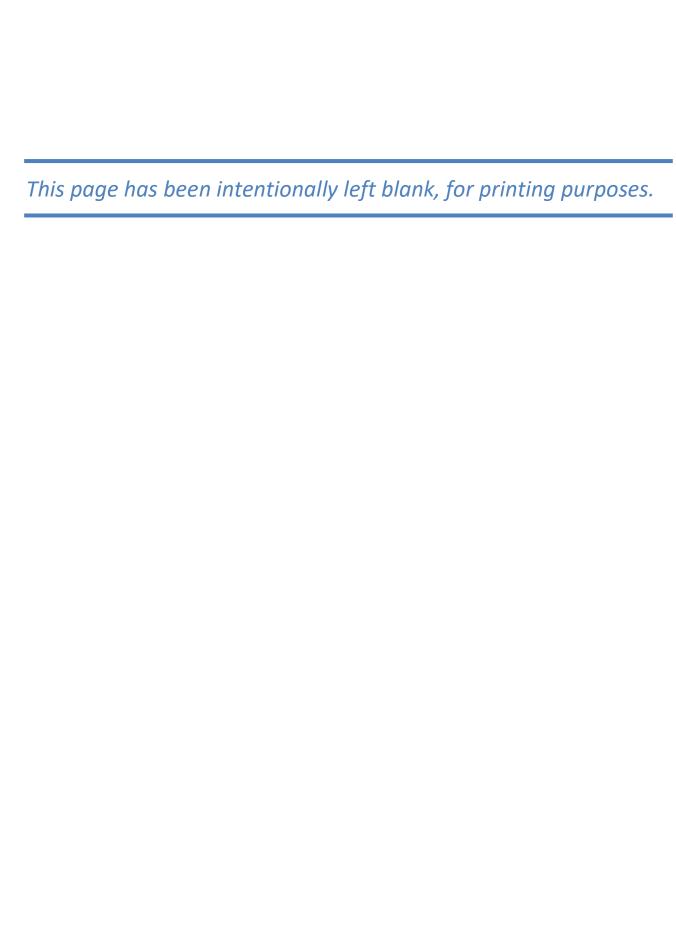
- The Voter Registration information and any accompanying documents received as part of this request will not be used for commercial solicitation or for any other purpose not related to the electoral process, or make the information available to the public or third parties or publish or republish the information in a way that allows it to be used in that manner.
- The information on this form is true, accurate, and complete to the best of my knowledge. I understand that a material misstatement of fact in completion of this document may constitute grounds for conviction of perjury.

$\boldsymbol{\alpha}$	n		re .
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Today s date (MM/DD/YYYY)

Sussex County Office
119 N Race St
P0 Box 457
PGeorgetown PE 0947
PG02945 330 f 29





# Candidate for School Board Member WITHDRAWAL FORM

l,	, here	eby withdraw as a candidate for school
(Print or Type Name of C	andidate)	
board member for Nominating District _	(	of the
	(If Required)	(Name of School District)
School District for the election to be he	ld on	
School District for the election to be he	(Date of	f Election)
Date:		
(S	ignature of Candid	ate)
		Sworn to and subscribed before me this
		day of
	•	NOTARY PUBLIC
	For Office Use On	у
Received by:		Date:

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#### **PRIVACY ACT STATEMENT**

Provided by the **Delaware State Bureau of Identification (SBI)** as information on fingerprinting and criminal background checks for School Board Candidates in Delaware

**Authority:** The Federal Bureau of Investigation's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application supplemental authorities include Federal statutes and State statutes pursuant to Pub L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

**Principal Purpose:** Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to, or retained by, NGI.

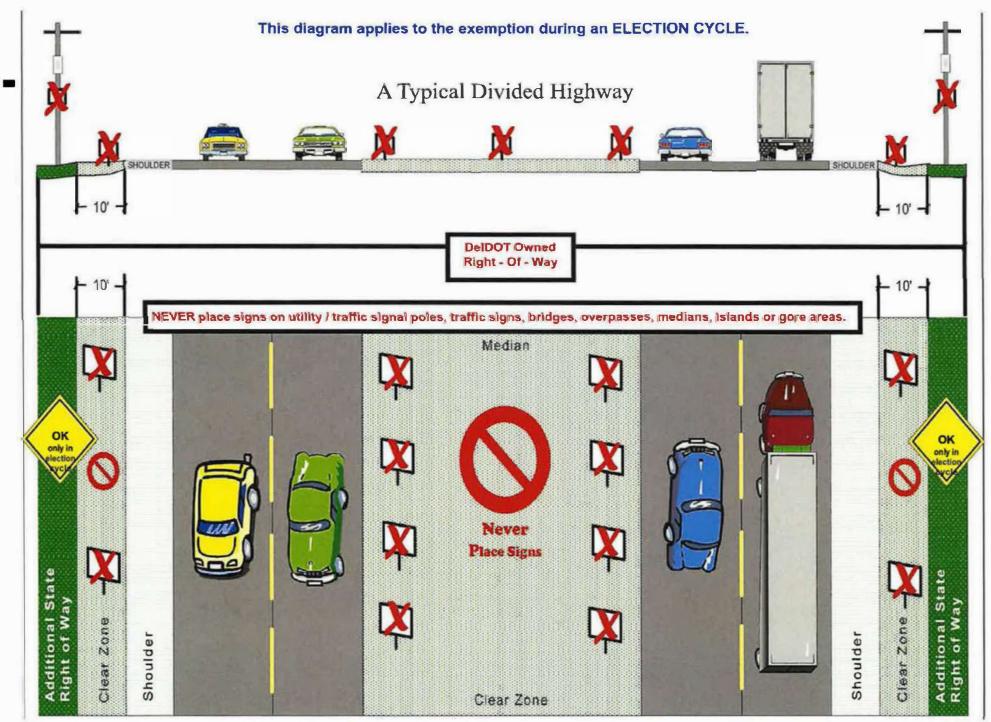
Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine Uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

#### **Applicant Notification and Record Challenge**

Your fingerprints will be used to check the criminal history records of the FBI. You have the opportunity to complete or challenge the accuracy of the information contained in the FBI identification record. The procedure for obtaining a change, correction, or updating an FBI identification record are set forth in Title 28, CFR, 16.34. You can find additional information on the FBI website at <a href="https://www.fbi.gov/about-us/cjis/background-checks">https://www.fbi.gov/about-us/cjis/background-checks</a>.

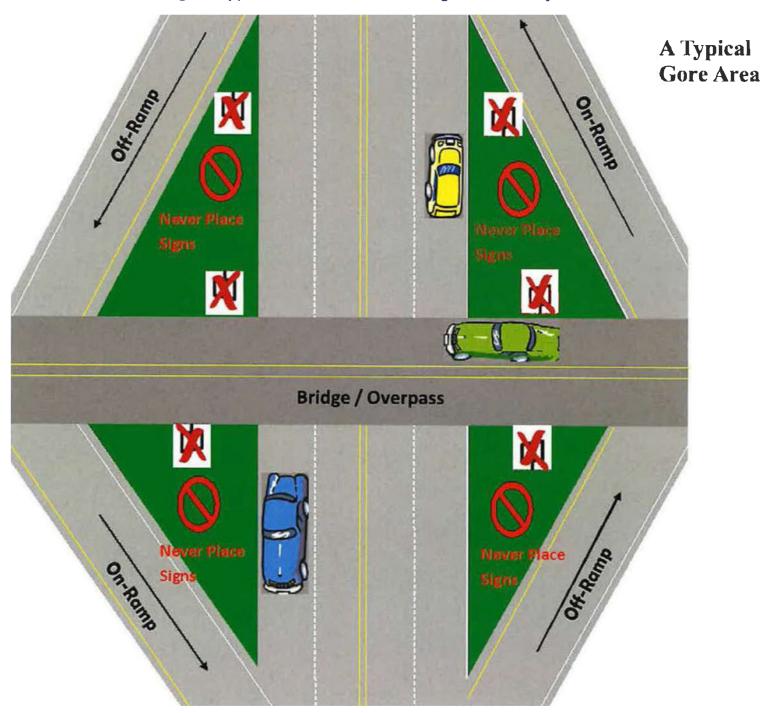
Updated 2019

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For questions call: New Castle Co- 326-4688, Kent Co- 760-2443, Sussex Co- 853-1327
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This diagram applies all the time, even during an election cycle.





## Before you dig to place campaign signs:

# **Call Miss Utility of Delmarva**

(800) 282-8555

OR

(800) 441-8355

Penalties for violating the Miss Utility laws: Actual repair costs and civil penalties up to \$2,500 per violation as well as up to <u>three times</u> the actual repair cost of the damaged utilities, plus punitive damages up to \$10,000 per incident.



36404 Club House Road Millville, DE 19967 Phone: 302.539.0449 www.millville.delaware.gov

February 20, 2024

The Delaware Department of Elections

Attn. Kenneth McDowell

P.O. Box 457

Georgetown, DE 19947

Reference: Town of Millville's code §155-44F; Political Sign Permission Form

To whom it may concern,

With the upcoming primary election in April, the general election in November, as well as the fact that one of the polling places is located on the Town of Millville's property: we would like to remind you of our Code regarding political signs for candidates and referendums.

Attached to this letter is an excerpt from the Town of Millville's Code (§155-44F) regarding political signs for candidates and referendums. Please review and forward this information to any political candidates who will be running for election within the municipal boundaries of the Town of Millville. We have also attached a copy of permission form (which can also be found on our website: <a href="https://millville.delaware.gov/community/forms-applications/">https://millville.delaware.gov/community/forms-applications/</a>) which we have created as an easier way for candidates to adhere to §155-44F(4).

If you have any questions or concerns, please feel free to contact James Simpson and/or Eric Evans at <a href="mailto:isimpson@mvtown.com">isimpson@mvtown.com</a> and <a href="mailto:evans@mvtown.com">evans@mvtown.com</a> respectively.

Sincerely,

James Simpson

### Chapter 155. Zoning

### Article IX. Sign Regulations

### § 155-44. Signs permitted in all districts.

- F. Political signs.
  - (1) No artificially illuminated signs of any type are allowed;
  - (2) Size is limited to four (4) square feet per side;
  - Signs must be freestanding;
  - (4) Shall be placed only on private property with permission of the property owner in writing;
  - (5) No more than one (1) sign per candidate or referendum is allowed per lot; [Amended 4-12-2016 by Ord. No. 16-06]
  - (6) (Reserved)[2]
    - [2] Editor's Note: Former Subsection F(6), which set forth time limits for the erection of political signs, was repealed 4-12-2016 by Ord. No. 16-06.
  - (7) No sign shall be placed closer than twenty-five (25) feet to an intersection;
  - (8) No signs shall be erected in a right-of-way; [Amended 4-12-2016 by Ord. No. 16-06]
  - (9) No permit is required.