SCHOOL BOARD MEMBER CANDIDATE
FILING PACKET

FORMS AND INFORMATION (enclosed)
School Board Candidate Filing Form
Candidate Ballot Name Form
Delaware Child Protection Registry Consent Form
Criminal History Record Check Authorization Form (SBI Form)
How to file Online Certification of Intention Candidate Information Sheet
Withdrawal Form

INSTRUCTIONS
1. A qualified person seeking to become a candidate for election to the Board of Education for a public school district shall complete a signed and notarized School Board Member Candidate Filing Form, and complete the Delaware Child Protection Registry Consent Form, and submit these forms to the Department of Elections for the county in which the administrative office of the school district is located no later than 4:30 p.m. on the first Friday in March. If the first Friday in March is a State of Delaware holiday, the filing deadline shall be extended to 4:30 p.m. on the State’s next regular business day. The individual filing for school board candidate must complete Part I of the Delaware Child Protection Registry Consent Form and submit a check in the amount of $14 payable to the State of Delaware to cover the fee for the CPR check. The Department of Elections must complete Part II of the form and performs the check. PLEASE NOTE: Candidates filing for seats on the Milford and Smyrna School Districts Boards of Education shall file with the Department of Elections for Kent County.

2. PLEASE NOTE: An individual seeking election to a school board is not considered an “official” candidate until (1) the individual files a completed, notarized candidate filing form (a copy of which is included on page 3) 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.

3. The person filing as a candidate must either file a Certification of Intention or form a Candidate Committee with the Office of the State Election Commissioner. For instructions, please see page 11.

4. A person who decides to withdraw as a candidate for election to the Board of Education for a public school district must complete a signed and notarized Withdrawal Form and submit such form to the Department of Elections for the county where they filed.

5. The Candidate Information Sheet provides information about the conduct of the election and rules governing access to the polling place. All candidates and their representatives shall comply with all rules regarding electioneering and the polling place.

6. Contact the Department of Elections for the county responsible for the election if you have any questions.

KENT COUNTY
Dept. of Elections for Kent County
100 Enterprise Place, Suite 5
Dover, DE 19904
(302) 739-4498
FAX: (302) 739-4515

NEW CASTLE COUNTY
Dept. of Elections for New Castle County
820 N. French Street, Suite 400
Wilmington, DE 19801
(302) 577-3464
FAX: (302) 577-6545

SUSSEX COUNTY
Dept. of Elections for Sussex County
119 N. Race Street
Georgetown, DE 19947
(302) 856-5367
FAX: (302) 856-5082
This page has been intentionally left blank, for printing purposes.
School Board Member
CANDIDATE FILING FORM

I, ___________________________________, 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 District _____________ of the ______________________ School
(If Required) (Name of School District)

District, that I 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 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 hold a paid position that is subject to the
rules and regulations of the school board for the above-named school district and that I have not
been convicted of embezzlement of public money, bribery, perjury or other infamous crime.

I acknowledge and understand that in accordance with 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 check under Section 309(a) of Title 31 of
the Delaware Code. Please see Candidate Information Sheet for more information on
requesting the required background check.

Mailing Address if different than residence address: ________________________________
_____________________________________________________________________________

Phone: (H)_____________________________ (W) _______________________________
Email:___________________________________________
This Candidate Filing Form will not be deemed complete or submitted unless the Candidate’s signature is notarized below.

Date: ______________

__________________________________________
(Signature of Candidate)

Sworn to and subscribed before me this
day of ______________, _______.

__________________________________________
NOTARY PUBLIC

-------------------------------------------------------- For Office Use Only -------------------------------------------------------

Received by: ____________________________ Date: ___________________
Via email to: __________________________________

Candidate Name as it appears on 2023 Candidate Filing Form:
___________________________________________________________________

RE: 2023 Elections

Dear Candidate:

The Department wishes to confirm how you would like your name to appear on the ballot. 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 2023 Candidate Filing Form.

_____ You may request a shortened form of your full name appear on the ballot. For example, if your full name is Elizabeth Mary Doe, you may request Elizabeth M. Doe or E. Mary Doe 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 William Doe and you are known in your business dealings and in the community as Bill, you may request Bill Doe 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 Elizabeth Doe, and you generally use Lisa as a nickname, you may request Elizabeth “Lisa” Doe appear on the ballot.

_____ You may request a derivation of your name appear on the ballot. For example, if your full name is Bernard Doe, you may request Bernie Doe 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 3, 2023. If we do not receive your completed form by this deadline, your name will appear on the ballot(s) as it appears on your 2023 Candidate Filing Form.

[OVER]
Requested Ballot Name (print clearly below):

_____________________________________________________________________

CERTIFICATION: By selecting an option above, and by completing and returning this request to the Department of Elections, I certify (1) that I have completed this request truthfully and accurately; and (2) that this request is not made to defraud or mislead the public, to misrepresent my identity, or for any other improper or illegal purpose. I understand that the Department of Elections may require me to make a satisfactory showing to support the option that I have selected herein, and that the Department may reject this request at its discretion if a satisfactory showing is not made.

_____________________________________________________________________

CANDIDATE NAME and OFFICE SOUGHT (print clearly)

This form will not be deemed complete or submitted unless the Candidate’s signature is notarized below.

_____________________________________________________________________

Signature of Candidate

Date: ______________________

Sworn to and subscribed before me this ______ day of ______________, _______

__________________________________

NOTARY PUBLIC

For Office Use Only

Received by: ___________________________ Date: ____________
PART I - APPLICANT INFORMATION

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 or 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.)
This page has been intentionally left blank, for printing purposes.
CRIMINAL HISTORY RECORD CHECK AUTHORIZATION FORM
USE FOR APPLICANT PURPOSES
(PLEASE PRINT OR TYPE ALL INFORMATION IN BLACK INK)

LAST NAME ____________________________ FIRST NAME ____________________________ MI __________________ SUFFIX __________________

ALIASES: MAIDEN / PREVIOUS LAST NAMES ____________________________________________________________

DATE OF BIRTH: ____/____/______ SOCIAL SECURITY #: _______________ - ______

SEX ______ RACE _______ HEIGHT _______ WEIGHT _______ EYES _______ HAIR _______

PLACE OF BIRTH (STATE/COUNTRY) ____________________________ CITIZENSHIP (COUNTRY) ____________________________

CURRENT ADDRESS: _____________________________________________________________

CITY/STATE: ____________________________ ZIP: ____________________________

TELEPHONE NUMBER: Home/Cell: (_____) ___________________ Work: (_____) ___________________

* COMPLETE IF MAILING RESULTS TO DIFFERENT ADDRESS OTHER THAN YOURSELF:
  NAME/COMPANY: ____________________________
  ADDRESS: ____________________________
  CITY/STATE: ____________________________
  ATTN: ____________________________

AUTHORIZATION TO RELEASE INFORMATION:

As an applicant I authorize release of any and all information that you have concerning me, including CRIMINAL HISTORY
RECORD INFORMATION and other information of a confidential or privilege nature. I hereby release you, your
organization, the State of Delaware and others from any liability or damage, which may result from furnishing this
information:

NOTIFICATION:

If mandated by state statute, your fingerprints will be used to check the criminal history records of the FBI. You will be given
the opportunity to complete or challenge the accuracy of the information contained in the FBI criminal history record by the
official to whom you have authorized this information be disseminated.

SIGNATURE OF APPLICANT: ____________________________ DATE: __________________

SIGNATURE OF PARENT/GUARDIAN (IF UNDER 18): ____________________________

USE OF CRIMINAL HISTORY RECORD INFORMATION IS RESTRICTED BY LAW AND SHALL BE LIMITED TO
THE PURPOSE FOR WHICH IT WAS GIVEN. MISUSE CONSTITUTES A CRIMINAL VIOLATION.

OFFICIAL USE ONLY

__________________________________________
_____________________/_______

AGENCY School Board Candidacy CODE TIME

REASON FINGERPRINTED
This page has been intentionally left blank, for printing purposes.
Overview of School Board Candidate Campaign Finance Filing Requirements

<table>
<thead>
<tr>
<th>Compensation &amp; Campaign Fundraising and Expenditures</th>
<th>Certification of Intention Required</th>
<th>Statement of Organization for Candidate Committee Required</th>
</tr>
</thead>
<tbody>
<tr>
<td>Compensation for school board member is less than $1,000 annually and the candidate does not 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</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Compensation for school board member is less than $1,000 annually and the candidate does intend to receive more than $5,000 for campaign expenses or expend more than $5,000 on campaign expenses during the campaign</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Compensation for school board member is more than $1000 annually and the candidate does not intend to receive more than $5,000 for campaign expenses or expend more than $5,000 on campaign expenses during the campaign</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Compensation for school board member is more than $1,000 annually and the candidate does intend to receive more than $5,000 for campaign expenses or expend more than $5,000 on campaign expenses during the campaign</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

**How to File a Certification of Intention:**
Visit: [https://cfrs.elections.delaware.gov](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: [https://cfrs.elections.delaware.gov](https://cfrs.elections.delaware.gov)
- 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
This page has been intentionally left blank, for printing purposes.
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.

- To obtain Criminal Background Check required pursuant to Section 209(a) of Title 14 of the Delaware Code contact the Delaware State Bureau of Identification (SBI). Additional information:
  
  o Information on where, when and how to get these checks completed is available at the Delaware State Police website, [https://dsp.delaware.gov/obtaining-a-certified-criminal-history](https://dsp.delaware.gov/obtaining-a-certified-criminal-history), or by calling (302) 739-5871 in Kent County or (302) 739-2528 in New Castle County and Sussex County.

  o Appointments are required for the Delaware State Police Troop 2 [New Castle County] or Georgetown [Sussex County] locations. Walk-ins are accepted at the Dover [Kent County] location between 8:30AM and 3:00PM.

  o When you go, inform the SBI staff that you are obtaining a background check in order to qualify as a school board candidate. This is a fingerprinted Delaware and national criminal background check and Child Protection Registry background check under Section 309 of Title 31 of the Delaware Code. The cost for the national criminal background Check is $65.00.

  o Instruct the SBI to send the results to:
    Delaware Department of Elections
    ATTN: School Board Candidate Filings
    905 S Governors Ave, Ste 170
    Dover, DE 19904

- 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 ½ 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.
Candidate for School Board Member
WITHDRAWAL FORM

I, __________________________________ , hereby withdraw as a candidate for school board member for Nominating District _____________ of the __________________________ (If Required) (Name of School District) School District for the election to be held on __________________________. (Date of Election)

Date: _____________________________

__________________________________
(Signature of Candidate)

Sworn to and subscribed before me this ______day of ______________________

__________________________________
NOTARY PUBLIC

------------------------------------------------------------------ For Office Use Only ------------------------------------------------------------------

Received by: ___________________________________________ Date: ___________________
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 https://www.fbi.gov/about-us/cjis/background-checks.

Updated 2019