

# Candidate Acceptance of Petition Nomination

## State Board of Education

Office Use Only:

Complete, sign, attach to the petition, and file with the Colorado Secretary of State. Please type or print legibly.

### Office Information

State Board of Education, District #

**Qualifications for Office (You must check each box to affirm that you meet the qualifications for this office)**

At least 18 years old  Registered and qualified elector of the Congressional District  United States citizen

### Candidate Information

Full Legal Name

Name exactly as it will appear on the official ballot

#### Residence & Mailing Address

Residence Street Address

City  State  Zip Code

Mailing Street Address

City  State  Zip Code

#### Telephone & E-mail Address

Business Phone #  Extension

Residence Phone #  E-mail Address

#### Campaign Website (optional)

Website

#### Voter Registration Information

Year of Birth  County of Registration

Party Affiliation  Date of Affiliation

### Signature

#### Applicant's Affirmation

I accept the nomination and solemnly affirm that I meet all qualifications for the office prescribed by law. Furthermore, the information provided on this form is, to the best of my knowledge, true and correct.

[seal]

Signature of Candidate \_\_\_\_\_

Date of Signing \_\_\_\_\_

STATE OF COLORADO

COUNTY OF \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ by \_\_\_\_\_  
Day Month Year Printed name of Candidate Above

Signature (and Title) of Notary / Official Administering Oath \_\_\_\_\_

My Commission Expires: \_\_\_\_\_



**Colorado Secretary of State**

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