

CLARENCE CENTRAL SCHOOL DISTRICT

Administration

Geoffrey M. Hicks, Ed.D.

Superintendent of Schools

MaryEllen Colling

Director of Special Education

Richard J. Mancuso

Business Official

Kristin Overholt

Director of Curriculum

John P. Ptak, Ed.D.

Director of Personnel



Board of Education

Michael Fuchs

President

Matthew Stock

Vice President

Tricia Andrews

James Boglioli

Maryellen Kloss

Dennis Priore

Dawn Snyder

MEMO

TO: Prospective Candidates for Board of Education

FROM: Richard J. Mancuso, Business Manager/District Clerk

RE: May 21, 2019 Board of Education Election

To be on the ballot as a candidate for the Board of Education Election on May 21, 2019; you must:

1. Be a qualified voter of the district.
 - You must be eighteen (18) years of age.
 - You must be a citizen of the United States.
 - You must be able to read and write.
2. You must have been a resident for at least one year.
3. You must have Forty Five (45) signatures of Clarence School District eligible voters. These petitions are due at the school district **no later than Monday, April 22, 2019 at 5:00 p.m.**

If you need any further information, please call my office at 407-9013. Thank you.

**PETITION FOR NOMINATION OF A CANDIDATE FOR A MEMBER OF THE
BOARD OF EDUCATION**

To the Clerk of the Clarence Central School District, Clarence, Erie County, New York; We, the undersigned, do hereby state that we are duly qualified voters of said Clarence Central School District and we hereby nominate the following named person as a candidate for a member of the Board of Education of said Clarence Central School District. There are two seats to fill, one term will go from **May 22, 2019 and end June 30, 2022**. The other will go from **July 1, 2019 and end June 30, 2022**. There are no designations regarding which term to serve. The highest vote getter will serve the longer term.

Name of Candidate: _____ Residence: _____

Phone Number: _____

SIGNATURE:

RESIDENCE OF SIGNER:

DATE:

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Name of Candidate: _____ Residence: _____

Phone Number: _____

SIGNATURE:

RESIDENCE OF SIGNER:

DATE:

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