



# Qualifying Statement of Intent CONSOLIDATED/CONSOLIDATED LINE SCHOOL DISTRICT TRUSTEE

I, \_\_\_\_\_  
*(Please print name, as it will appear on the ballot)*

a qualified elector of the \_\_\_\_\_ District, County of \_\_\_\_\_  
*(Area Represented by the Office Sought)*

\_\_\_\_\_, State of Mississippi; do hereby declare my candidacy as an independent candidate for the office of \_\_\_\_\_ Consolidated/Consolidated Line School District Trustee at the General/Special Election to be held on \_\_\_\_\_.  
*(Name of District)*  
*(Date of General/Special)*

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
*Last First Middle Month Day Year*

Mailing Address: \_\_\_\_\_  
*City, State, Zip Code*

Residential Address: \_\_\_\_\_  
*City, State, Zip Code*

Phone Number: ( ) \_\_\_\_\_ Email Address: \_\_\_\_\_

**I hereby certify that: (mark as applicable):**

- I have never been convicted of bribery, perjury or other infamous crime, being defined as a crime punishable by confinement in the penitentiary.
- I have never been convicted of a felony in federal court after December 8, 1992, nor of a crime in the court of another state which is a felony in this state, after December 8, 1992, as provided in Section 44 of the Mississippi Constitution.
- I meet all constitutional, statutory and other legal requirements to hold said office.

Signature of Candidate \_\_\_\_\_  
*Date*

Received by: \_\_\_\_\_  
*Signature Title Date*

<p><b>INTERNAL OFFICE USE:</b>          STMT OF INT W SIG _____          PETITION W CERT _____</p> <p><b>DATE STAMP</b></p>
---