White Sulphur Springs School District #8 Trustee Application

Name:_____ Date:_____

Physical Address:_____

Mailing Address: _____

City:_____ State:_____Zip:_____

Are you a registered voter residing in White Sulphur Springs School District #8? _____

If you are not a registered, would you be willing to register before appointment?_____

Reason for applying for Trustee position:_____

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Comments:_____

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Applicant's Signature