STATE OF WASHINGTON
SUPERINTENDENT OF PUBLIC INSTRUCTION
OLYMPIA

OATH OF OFFICE

STATE OF WASHINGTON, County of _______________________, ss

I, ________________________________________ do solemnly swear (or affirm) that I will support the Constitution of the United States and the State of Washington and will faithfully perform the duties of director of _________________________ School District No. _____ in the County of _______________________, State of Washington, according to the best of my ability.

_______________________________________
Signature

_______________________________________
Address

Subscribed and sworn to (or affirmed) before me this _______ day of __________, 20___.

_______________________________________
Signature - Official Administering Oath

_______________________________________
Title of Official

Signatures must be acknowledged by a school district or educational service district superintendent, a notary public or other official authorized to administer oaths.

Submit three copies of completed form to the educational service district superintendent, who will forward one copy to the county auditor and one to the Superintendent of Public Instruction, Attention: Consultant for Administrative Services.