

**Board of Review
Affidavit of Training Participation**

County of _____, State of Wisconsin

I, _____ (your name), being first duly sworn, do hereby state as follows:

1. That this affiant participated in Board of Review training on behalf of the Town/Village/City of _____, _____ County (your home county).
2. That this affiant is or is not (circle one) a member of the Board of Review of said town/village/city (circle one).
3. That on the _____ day of _____, 2025, this affiant met the certified training requirement by:
 - Viewing the 2025 How to Conduct a BOR First Meeting.
 - Attending a BOR training by _____, who has been certified to teach by the Wisconsin Department of Revenue.
 - Providing a completed BOR exam to accompany this affidavit.

Dated this _____ day of _____, 2025.

(Your signature)

Subscribed and sworn before me this _____ day of _____, 2025.

City/Town/Village Clerk, Town Chairperson, or Notary Public (circle one)

My commission ends _____

NOTES:

- Persons swearing to false information are subject to criminal fines or jail under Wis. Stat. § 946.32, and the Board of Review hearing and deliberations may be found invalid.
- Give to town, village, or city clerk with completed exam to retain on file.