

NOMINATION PAPER AND CANDIDATE'S ACCEPTANCE

Local Authorities Election Act
(Sections 12, 21, 22, 23, 23.1, 27, 28,
47, 68.1, 151, 158.3, Part 5.1)
Education Act (Sections 4(4), 74)

The personal information collected through this form is for administering the election. This collection is authorized by section 33(c) of the *Freedom of Information and Protection of Privacy Act*. For questions about the collection of personal information, contact

Elk Island Catholic Separate School Division

780-467-8896

Business Title/Organization

Business Phone Number

310 Broadview Road

Sherwood Park

AB

T8H 1A4

Address

City or Town

Province

Postal Code

LOCAL JURISDICTION: Elk Island Catholic Separate School Division, PROVINCE OF ALBERTA

We, the undersigned electors of Elk Island Catholic Separate School Division,
Name of Local Jurisdiction and Ward (if applicable)

nominate _____ of
Candidate's Surname and Given Names

Complete Address and Postal Code

as a candidate at the election about to be held for the office of Ward 2
Office Nominated for

of Elk Island Catholic Separate School Division
Name of Local Jurisdiction

The candidate's local political party or slate is _____ (if applicable).

Provide signatures of at least **5 ELECTORS ELIGIBLE TO VOTE** in this election in accordance with sections 27 and 47 of the *Local Authorities Election Act* and sections 4(4) and 74 of the *Education Act* (if applicable). If a city or a board of trustees under the *Education Act* passes a bylaw under section 27(2) of the *Local Authorities Election Act*, then the signatures of up to 100 electors eligible to vote may be required.

| Printed Name of Elector | Complete Address and Postal Code of Elector | Signature of Elector |
|-------------------------|---|----------------------|
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CANDIDATE'S ACCEPTANCE

I, the above-named candidate, solemnly swear (affirm) that

I am eligible under sections 21 and 47 (and section 12, in the case of summer villages) of the *Local Authorities Election Act* and sections 4(4) and 74 of the *Education Act* (if applicable) to be elected to the office,

I am not otherwise disqualified under section 22, 23 or 23.1 of the *Local Authorities Election Act*,

I will accept the office if elected,

I have read sections 12, 21, 22, 23, 23.1, 27, 28, 47, 68.1 and 151 and Part 5.1 of the *Local Authorities Election Act* and sections 4(4) and 74 of the *Education Act* (if applicable) and understand their contents,

I am appointing _____

Name, Contact Information or Complete Address and Postal Code, and Telephone Number of Official Agent

as my official agent (if applicable),

I have provided a criminal record check with my nomination package (if applicable),

I will read and abide by the municipality's code of conduct if elected (if applicable), and

The electors who have signed this nomination paper are eligible to vote in accordance with the *Local Authorities Election Act* and the *Education Act* and resident in the local jurisdiction on the date of signing the nomination.

(Print name as it should appear on the ballot.)

Candidate's Surname

Candidate's Given Names
(may include nicknames, but not titles, i.e. Mr., Ms. Dr.)

SWORN (AFFIRMED) before me

at the _____ of _____,

in the Province of Alberta,

this _____ day of _____, 20_____.



Signature of Candidate

Signature of Returning Officer or
Commissioner for Oaths

Commissioner for Oaths Stamp

**IT IS AN OFFENCE TO SIGN A FALSE AFFIDAVIT
OR A FORM THAT CONTAINS A FALSE STATEMENT**

RETURNING OFFICER'S ACCEPTANCE

Returning Officer signals acceptance by signing this form:

Signature of Returning Officer