

Nomination Form

Part 1: Nominee Information:

I, the undersigned Electors of Thunderchild First Nation hereby:

Nominate Candidate: _____ (insert name)

as a Candidate for the Position of: _____ (insert with Chief or Headman) of Thunderchild First Nation for the next ensuing term.

Elector Name (Print)

Registry Number

Elector Signature

Nominee (1)

Nominee (2)

I, _____ (insert name) hereby accept my nomination for the above position and understand that the within nomination is not effective unless the within form is signed the Chief Electoral Officer on or before the deadline specified in the *Thunderchild First Nation Election Act ("the Act")*. The undersigned further acknowledges that the undersigned have read and understands the election procedures and duties and obligations under the Act.

Dated this ____ day of _____ 20____.

Signature of Candidate: _____

The Chief Electoral Officer hereby confirms that based on information provided to date, the above candidate meets the eligibility requirements for candidates under the Act.

Dated this ____ day of _____ 20__.

Signature of Chief Electoral Officer

Nomination Form

Part 2: Candidate Information:

Candidate for the Position of: _____

Candidate Name: _____ / _____ / _____
(First) (Middle) (Last)

Name to appear on the Ballot (do not include titles such as Mrs., Dr., LLC before or after name):

- ☐ Same as Above
- ☐ Different:

_____ / _____ / _____
(First) (Middle) (Last)

Status Number: _____

Physical Address: _____

Mailing Address: _____

Postal Code : _____ Contact Phone: _____

Email: _____ Date of Birth: ____Day ____Month ____Year

Occupation: _____

Criminal Record Check Provided: ☐ YES ☐ NO

Nomination Fee Provided: ☐ YES ☐ NO

☐ I request a voters list to be emailed, and I will NOT misuse the voters list.

☐ I do not require a voters list.

Candidate Signature: _____

Optional Information to Provide:

☐ I allow the Chief Electoral Officer to publish my personal contact information.

Candidate Public Phone Number: _____

Candidate Public Email Address: _____