



DECLARATION & NOMINATION FORM

ONE ARROW FIRST NATION

IN PERSON NOMINATION FORM

1. NOMINATOR:

I nominate Candidate: _____

For the Position of: ☐ Chief ☐ Councillor

- ☐ I confirm I meet the qualifications to nominate a member of One Arrow First Nation for Chief and Council.

My Name is: _____ Status #: _____

Signature: _____ Phone #: _____

2. SECONDER:

I hereby second the nomination.

I nominate Candidate: _____

For the Position of: ☐ Chief ☐ Councillor

- ☐ I confirm I meet the qualifications to nominate a member of One Arrow First Nation for Chief and Council.

My Name is: _____ Status #: _____

Signature: _____ Phone #: _____



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3. CANDIDATE:

☐ I ACCEPT the nomination

☐ I DECLINE the nomination

I want my name to appear on the ballot as: _____

Surname

Given Name(s)/Nicknames/Alias

Status #

Phone Number

Mailing Address

Email Address

Candidate Signature

Electoral Officer Signature