## NOMINATION PAPER AND CANDIDATE'S ACCEPTANCE THE PARKLAND SCHOOL DIVISION



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

Note: The personal information on this form is being collected to support the administrative requirements of the local authorities election process and is authorized under sections 21 and 27 of the *Local Authorities Election Act* and section 33(c) of the *Freedom of Information and Protection of Privacy Act*. The personal information will be managed in compliance with the privacy provisions of the *Freedom of Information and Protection of Privacy Act*. If you have any questions concerning the collection of this personal information, please contact the Legal Services Coordinator at 780-968-3229.

| LOCAL JURISDICTION:                                                                                      | Parkland County,              | PROVINCE OF ALBEI                                        | RTA            |                        |
|----------------------------------------------------------------------------------------------------------|-------------------------------|----------------------------------------------------------|----------------|------------------------|
| We, the undersigned elector                                                                              | ors of THE PARKLA             | ND SCHOOL DIVISION                                       | WARD#          | , nominate             |
|                                                                                                          |                               | ,                                                        |                | of                     |
| Candidate Surname                                                                                        |                               | Candidate Given Nan                                      | nes            |                        |
|                                                                                                          |                               |                                                          | as a cand      | lidate at the election |
| Complete Address and Post                                                                                | al Code                       |                                                          |                |                        |
| about to be held for the off                                                                             | ice of<br>Office Nominated fo | or: School Trustee and Ward No                           | _ of PARKLAN   | ID <b>COUNTY.</b>      |
| Signatures of at least <b>5 ELE</b> 6<br>47 of the <i>Local Authorities</i> lelections suggests you exce | Election Act To ensu          | re your nomination for                                   | rm is not reje |                        |
| Printed Name of Elector                                                                                  | -                             | Complete address and Postal Signature of Code of Elector |                | f Elector              |
|                                                                                                          |                               |                                                          |                |                        |
|                                                                                                          |                               |                                                          |                |                        |
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|                                                                                                          |                               |                                                          |                |                        |
|                                                                                                          |                               |                                                          |                |                        |

## Candidate's Acceptance

I the above named candidate, solemnly swear (affirm)

- THAT I am eligible under section 21 and 47 (and section 12, in the case of summer villages) of the *Local Authorities Election Act* and 74 of the *Education Act* (if applicable) to be elected to the office;
- THAT I am not otherwise disqualified under section 22 or 23 of the Local Authorities Election Act;
- THAT I will accept the office if elected;
- THAT I have read sections 12, 21, 22, 23, 27, 28, 47, 68.1 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;
- THAT I am appointing

Name, Contact Information or Complete Address and Postal Code and Telephone Number of Official Agent (if applicable)

As my official agent.

- THAT I will read and abide by the municipalities code of conduct if elected (if applicable); and
- THAT 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                                                                                                                                        | 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,  Thisday of, 20                                                                         | (Signature of Candidate)  Commissioner for Oath Stamp                    |  |  |  |
| (Signature of Returning Officer or delegate, Commor Notary Public for Alberta. Also include printed of and expiry date. A stamp is not required for the Re | or stamped name                                                          |  |  |  |
| RETURNING OFFICER'S ACCEPTANC                                                                                                                              | E                                                                        |  |  |  |
| Returning Officer signals acceptance by                                                                                                                    | signing this form:                                                       |  |  |  |
| (Signature of Returning Officer)                                                                                                                           |                                                                          |  |  |  |