

THE _____ FRANCOPHONE EDUCATION REGION NO. _____, PROVINCE OF ALBERTA

We, the undersigned electors of The _____ Francophone Education Region No. _____,

nominate _____ of _____
(name of candidate) (address of candidate)

as a candidate at the election about to be held for the office of _____

of the Regional authority of The _____ Francophone Education Region No. _____.

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 section 256(1)(1.1)(2) of the *School Act*.

Printed Name of Elector	Address of Elector	Signature of Elector

CANDIDATE'S ACCEPTANCE

I, the said _____ named
(surname) (given names)

in the foregoing nomination, solemnly swear (affirm)

THAT I am eligible under sections 21 and 47 of the *Local Authorities Election Act* and section 256(3)(3.1) of the *School Act*;

THAT I am not otherwise disqualified under section 22 of the *Local Authorities Election Act* and section 256(3)(3.1) of the *School Act*;

THAT I will accept the office if elected;

THAT I have read sections 12, 21, 22, 27, 47 and 151 of the *Local Authorities Election Act* and section 256(3)(3.1) of the *School Act* and understand their contents; and

THAT I am appointing _____ as my official agent.
(name, address and telephone number of official agent) (if applicable)

Print name as it should appear on the ballot

(Candidate's Surname)

(Given Names) (may include nicknames,
but not titles, i.e. Mr., Mrs., Dr.)

SWORN (AFFIRMED) BEFORE ME

at the _____ of _____
in the Province of Alberta, this _____ day of _____
_____ 20 _____ .

(Candidate's Signature)

(Signature of Returning Officer or Commissioner for Oaths)

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

NOTE :

The personal information that is being collected under the authority of the *Local Authorities Election Act* and the *School Act* will be used for the purposes under those Acts. It is protected by the privacy provisions of the *Freedom of Information and Protection of Privacy Act*.

If you have any questions about the collection, contact

(title and business phone number of the responsible official)