

**NOMINATION PAPER AND CANDIDATE'S ACCEPTANCE  
PUBLIC SCHOOL TRUSTEE**

*Local Authorities Election Act, (section 12, 21, 22, 27, 47, 151)  
School Act, (section 44(4))*

**LOCAL JURISDICTION: EDMONTON SCHOOL DISTRICT NO. 7, PROVINCE OF ALBERTA**  
**ELECTION DATE: OCTOBER 18, 2010**

We, the undersigned electors of Ward \_\_\_\_ of Edmonton School District No. 7, Province of Alberta,  
**NOMINATE:**

\_\_\_\_\_, \_\_\_\_\_ of  
 (Candidate's Surname) (Candidate's Given Names)

\_\_\_\_\_  
 (Street Address of Candidate's Residence or Legal Land Description of Candidate's Residence)

Edmonton, Province of Alberta, as a candidate at the election about to be held for the office of TRUSTEE of  
 Ward \_\_\_\_\_, Edmonton School District No. 7, Province of Alberta.

Signatures of **at least 25 ELECTORS ELIGIBLE TO VOTE** in this election in accordance with  
 sections 27 and 47 of the *Local Authorities Election Act* and section 44(4) of the *School Act*.

Printed Name of Elector	Street Address or Legal Land Description of the Residence of Elector	Signature of Elector
1.		
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## NOMINATION PAPER AND CANDIDATE'S ACCEPTANCE PUBLIC SCHOOL TRUSTEE

 \_\_\_\_\_  
 (Candidate's Surname)

 \_\_\_\_\_  
 (Candidate's Given Names)

Printed Name of Elector	Street Address or Legal Land Description of the Residence of Elector	Signature of Elector
25.		
26.		
27.		
28.		
29.		
30.		
31.		
32.		
33.		
34.		
35.		

### CANDIDATE'S ACCEPTANCE

I, the above named candidate solemnly swear (affirm):

THAT I am eligible under sections 21 and 47 of the *Local Authorities Election Act* and section 44(4) of the *School Act* to be elected to the office;

THAT I am not otherwise disqualified under Section 22 of the *Local Authorities Election 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 44(4) of the *School Act* and understand their contents; and

THAT I am appointing as my official agent (if applicable):

 \_\_\_\_\_  
 (Name, Email Address and Telephone Number of Official Agent)

**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 City of )  
 Edmonton, in the Province of Alberta this \_\_\_\_ )  
 day of \_\_\_\_\_, 2010. )

 \_\_\_\_\_  
 Candidate's Signature

 \_\_\_\_\_ )  
 Commissioner for Oaths in and for the )  
 Province of Alberta

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

The personal information that is being collected under the authority of the *Local Authorities Election Act* will be used for the purposes under that *Act*. It is protected by the privacy provisions of the *Freedom of Information and Protection of Privacy Act*. If you have questions about the collection, contact the Manager, Elections & Census at 780 496 8008.