



WAYWAYSEECAPPO FIRST NATION  
*In Partnership with*  
PARK WEST SCHOOL DIVISION



**CANDIDATE NOMINATION**  
for school trustee of Park West School Division

I, \_\_\_\_\_, seek to be nominated to the office of trustee for Park West School Division.  
(surname and usual name of candidate)

**Note: Your name will appear on the ballot as it is written on the nomination form.**

Telephone number: \_\_\_\_\_

Address/ description of land that qualifies the candidate to be nominated: \_\_\_\_\_

Mailing address (if different): \_\_\_\_\_

**NAME, ADDRESS/LOCATION, AND SIGNATURE OF QUALIFIED VOTERS:**

(only eligible voters that appear on the voters list of the local authority in which you are seeking office can support the nomination)

	Full Name (Print)	Address or Location (Print)	Signature (Sign)
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