



CREE SCHOOL BOARD NOMINATION FORM 2024 ELECTION FOR CHAIRPERSON

WE, THE UNDERSIGNED, being at least ten (10) members of the Cree Nation, each of the age of majority and not being affected by any legal incapacity or subject to protective supervision within the meaning of the *Civil Code of Quebec* in accordance with section 4.06 of the General By-Law of the Board (By-Law No. 1), do hereby **NOMINATE** for the position of the Cree School Board Chairperson the following person ("**Candidate**"), who is also a member of the Cree Nation, being of the age of majority and entitled to hold office of Chairperson in accordance with section 4.03 of the General By-Law of the Board (By-Law No. 1)

CANDIDATE NOMINATED: _____

DATE OF BIRTH: _____

CREE BENEFICIARY NUMBER: _____

COMMUNITY: _____

POSTAL CODE: _____

STREET ADDRESS: _____

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VOTER SIGNATURE 1. _____

NAME IN BLOCK LETTERS: _____

Beneficiary #: _____ **Community:** _____

VOTER SIGNATURE 2. _____

NAME IN BLOCK LETTERS: _____

Beneficiary #: _____ **Community:** _____

**CREE SCHOOL BOARD
NOMINATION FORM
2024 ELECTION FOR CHAIRPERSON**

CANDIDATE NOMINATED: _____

VOTER SIGNATURE 3. _____

NAME IN BLOCK LETTERS: _____

Beneficiary #: _____ **Community:** _____

VOTER SIGNATURE 4. _____

NAME IN BLOCK LETTERS: _____

Beneficiary #: _____ **Community:** _____

VOTER SIGNATURE 5. _____

NAME IN BLOCK LETTERS: _____

Beneficiary #: _____ **Community:** _____

VOTER SIGNATURE 6. _____

NAME IN BLOCK LETTERS: _____

Beneficiary #: _____ **Community:** _____

VOTER SIGNATURE 7. _____

NAME IN BLOCK LETTERS: _____

Beneficiary #: _____ **Community:** _____

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CANDIDATE NOMINATED: _____

VOTER SIGNATURE 8. _____

NAME IN BLOCK LETTERS: _____

Beneficiary #: _____ **Community:** _____

VOTER SIGNATURE 9. _____

NAME IN BLOCK LETTERS: _____

Beneficiary #: _____ **Community:** _____

VOTER SIGNATURE 10. _____

NAME IN BLOCK LETTERS: _____

Beneficiary #: _____ **Community:** _____

VERIFIED BY: _____ **DATE:** _____

RETURNING OFFICER

RETURN ALL NOMINATION FORMS TO:

**John Henry Wapachee
Regional Returning Officer
P.O. Box 131
6 Bear Trail
Nemaska (QC), J0Y 3B0
Cell: (514) 601-4607
Fax: (contact the Regional Returning Officer)
Email: RegionalReturningOfficer@cscree.qc.ca or
jhwapachee@nemaska.ca**

**COMPLETED NOMINATION FORMS MUST BE RECEIVED BY THE
REGIONAL RETURNING OFFICER NO LATER THAN SEPTEMBER 9, 2024
AT 11:59PM**