



**NOMINATION PAPER AND CANDIDATE'S ACCEPTANCE  
(PUBLIC SCHOOL BOARD TRUSTEE)**

*Local Authorities Election Act*

(Sections 12, 21, 22, 23, 23.1, 27, 28, 47, 68.1, 151, 158.3, Part 5.1)

*Education Act*

(Sections 4(4), 74)

LOCAL JURISDICTION: CALGARY BOARD OF EDUCATION, PROVINCE OF ALBERTA

We, the undersigned electors of city wards \_\_\_\_\_ and \_\_\_\_\_ of the Calgary Board of Education, nominate

\_\_\_\_\_  
(candidate surname) (given names)

of

\_\_\_\_\_  
(complete address and postal code)

as a candidate at the election about to be held for the office of PUBLIC SCHOOL BOARD TRUSTEE of The  
Calgary Board of Education.

Provide 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*, sections 4(4) and 74 of the *Education Act* and the Calgary Board of Education Bylaw Number 1 of 2007.

	Printed name of elector	Complete address and postal code of elector	Signature of elector
1			
2			
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8			
9			
10			

	Printed name of elector	Complete address and postal code of elector	Signature of elector
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**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 sections 4(4) and 74 of the *Education Act* to be elected to the office,
- I am not otherwise disqualified under section 22, 23 or 23.1 of the *Local Authorities Election Act*,
- I will accept the office if elected,
- I have read sections 12, 21, 22, 23, 23.1, 27, 28, 47, 68.1 and 151 and Part 5.1 of the *Local Authorities Election Act* and sections 4(4) and 74 of the *Education Act* and understand their contents,
- I am appointing \_\_\_\_\_

\_\_\_\_\_  
(name, contact information or complete address and postal code, and telephone number of official agent)

as my official agent (if applicable),

- I have provided a criminal record check with my nomination package, **and**
- 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)

\_\_\_\_\_  
(candidate's 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, this \_\_\_\_\_ day of  
\_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Signature of Candidate

Commissioner for Oaths stamp

\_\_\_\_\_  
Signature of Returning Officer or Delegate or  
Commissioner for Oaths

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

**RETURNING OFFICER'S ACCEPTANCE**

Returning Officer signals acceptance by signing this form:

\_\_\_\_\_  
Signature of Returning Officer or Delegate

The personal information collected through this form is for administering the election. This collection is authorized by section 33(c) of the *Freedom of Information and Protection of Privacy Act*. For questions about the collection of personal information, contact Leader, Election Services for The City of Calgary by phone at (403) 476-4110, by email at [candidates@calgary.ca](mailto:candidates@calgary.ca) or by mail at The City of Calgary, Mail Code #207, P.O. Box 2100, Station M, Calgary, AB, Canada, T2P 2M5.