



# CANDIDATE NOMINATION PAPER

## Sunrise School Division School Trustee 2020 Election

I, \_\_\_\_\_ seek to be nominated

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

to the office of **School Trustee** for **Sunrise School Division**.

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

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

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Mailing address (if different):

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**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)*

<b>Full Name (Print)</b>	<b>Civic Address or Location (Print)</b>	<b>Signature (Sign)</b>
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**DECLARATION OF CANDIDATE**  
(for School Trustee of a Sunrise School Division)

I, \_\_\_\_\_ a candidate  
*(name of candidate)*

nominated for the office of School Trustee for Ward 3 for  
*(state office)* *(ward #)*

**Sunrise School Division** at this election, do solemnly declare:  
*(name of local authority)*

1. That I am a Canadian citizen and will be the full age of eighteen years at the date of the election.
2. That I am a resident in the school division or school district, and will have been for a period of at least six months at the date of the election.
3. That my place of residence is:

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*(Here give exact address or description of place of residence, including name of school division, etc. in which the nominee resides).*

4. That I am not disqualified from holding office under *The Municipal Councils and School Boards Elections Act* or any other Act of the Legislature, and am not otherwise by law prohibited, from being a trustee or from voting at election in the school division or school district.

And I make this declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath, and by virtue of *The Manitoba Evidence Act*.

Declared before me at the \_\_\_\_\_ )  
of \_\_\_\_\_ )  
in the Province of Manitoba, )  
this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_ )

\_\_\_\_\_  
(Person authorized to administer oath)

\_\_\_\_\_  
(Signature of candidate)