

## NOMINATION FORM

### Sheshatshiu Innu First Nation 2018

We, the undersigned individuals, being eligible to vote in the Sheshatshiu Innu First Nation election being held on September 5 , 2018 hereby nominate to:

\_\_\_\_\_ of the community of Sheshatshiu  
(name of nominee)

For the position of **Councilor (Female or Male)** of the Sheshatshiu Innu First Nation.

1.	6.
2.	7.
3.	8.
4.	9.
5.	10.

A minimum of 10 eligible voters must sign for a nomination to be valid. Nominees for the position of must be members in Sheshatshiu Innu First Nations, be 18 years of age as of Sept 5, 2018

I, \_\_\_\_\_, accept this nomination.  
(name of candidate)

\_\_\_\_\_  
(candidate signature)

Declared before me at \_\_\_\_\_

This \_\_\_\_\_ day of \_\_\_\_\_, 2018

\_\_\_\_\_  
Election official