

Instructions

It is the responsibility of the person being nomination to file a complete and accurate nomination form. Please print or type information (except signatures).

Nominee's Name, as it is to appear on the ballot

Nominee's Municipality

Nominee's Municipal Position

Mailing Address

Municipality	Postal Code
Email Address	Telephone number

Declaration of Qualification and Consent to Hold Office

I, the Nominee mentioned in this Nomination Form, declare that I am presently legally qualified to be elected and consent to hold the office for which I am nominated, if elected.

☐ I am nominated for the office of Zone ____ Representative.

☐ A Council resolution supporting this nomination is attached or has been sent separately.

Signature of Nominee

Date

Certification by Returning Officer

I, the undersigned Returning Officer of the Rural Ontario Municipal Association, do hereby certify that I have examined the Nomination Form of the aforementioned nominee filed with me and am satisfied that the nominee is qualified to be nominated for the office indicated above.

Signature

Date