MUNICIPAL GOVERNMENT ACT Nomination of Candidate Form

Eligible candidate accepts official nomination

# PURSUANT TO SECTION 26 AND SECTION 29 OF THE MUNICIPAL ELECTION REGULATIONS

We, the undersigned qualified electors, of the [name of municipality] nominate [full name of candidate] of [candidate address] as a candidate for:

|  |  |
| --- | --- |
| * Mayor
 | * Councillor, ward (if applicable)
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|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **NAME** | **SIGNATURE** | **ADDRESS** | **I AM AN ELIGIBLE ELECTOR IN THE ABOVE MUNICIPALITY/ WARD (Check)** |
| 1. |  |  |  |  |
| 2. |  |  |  |  |
| 3. |  |  |  |  |
| 4. |  |  |  |  |
| 5. |  |  |  |  |
| \*The *Municipal Government Act* requires a minimum of five (5) nominators. By bylaw, a municipality may require up to 10 nominators (the names of additional nominators may be attached to this form) |
| 6. |  |  |  |  |
| 7. |  |  |  |  |
| 8. |  |  |  |  |
| 9. |  |  |  |  |
| 10. |  |  |  |  |

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| --- |
| **To be completed by the candidate** |
| I confirm that I am eligible for and accept this nomination. I wish to be described on the ballot as: |
| Surname |  | Given or Assumed Name |
| Full Civic Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Candidate Signature |  | Date |

|  |
| --- |
| **To be completed by the Municipal Electoral Officer (MEO) or Returning Officer (RO)** |
| I confirm that I have received this nomination paper, and that this nomination paper has been accepted.  |
| MEO/ RO Signature |  | Date |
|  |

**Qualifications for Nominators (Electors)**

* Canadian citizen
* At least 18 years of age or older
* Lived in PEI for at least 6 months before election day
* Ordinarily a resident in the municipality (and ward, where applicable) on election day

**Eligibility for Candidates**

* Canadian citizen
* At least 18 years of age or older
* Ordinarily a resident in the municipality for a period of at least six months before the election

**Qualifications for Nominators (Electors) – Resort Municipality**

* Canadian citizen, at least 18 years of age on election day, lived in PEI for at least six months before the election, is ordinarily resident in the municipality on election day. OR
* Non-resident property owner who is a Canadian Citizen and is at least 18 years of age on election day. OR
* A person who entitled to vote on behalf of the corporation or co-operative association that is a non-resident property elector in accordance with the direction of the majority of the shareholders or members

**Eligibility for Candidates – Resort Municipality**

* Canadian citizen, at least 18 years of age, reside in PEI for at least 6 months before the election
* Candidates can be resident electors or non-resident property electors
* An individual who has ownership or membership interest of at least 25% in a corporation or incorporated co-operative association can be a candidate if they are a Canadian citizen, at least 18 years of age and have resided in PEI for at least 6 months before the election

Personal information of individuals on this application is collected under the *Freedom of Information and Protection of Privacy Act* of PEI, Section 31(c), as it is necessary for confirming council member eligibility, for contacting the nominated candidate to provide election information and materials that they are entitled to, and for confirming electoral eligibility to nominate a candidate. Questions or concerns can be directed to Municipal Affairs at (902) 620-3558

or municipalaffairs@gov.pe.ca.

Form Last Revised: January 2022 2

**OPTIONAL: TO BE COMPLETED BY CANDIDATE**

**Candidate Demographics – Statistics Collection**

* The Municipal Affairs Division is focused on promoting diversity in municipal councils Island-wide. Tracking information about the diversity of candidates is truly valuable, and allows us to identify gaps in representation, and helps us to encourage candidate participation from under-represented groups.
* The information you choose to provide in this form will be kept strictly confidential and will be converted into statistics used by our Division to make informed decisions when planning future engagement and election related programs or projects. General statistics may be shared with stakeholders and community groups upon request.
* The information that you provide may be used for other statistical and research purposes or may be combined with other survey or administrative data sources. The provision of any information is optional, and it is up to the Candidate what they choose to disclose.
* If you have any questions about how this information will be used, or would like to provide feedback please contact the Municipal Affairs office at (902) 620-3558 or municipalaffairs@gov.pe.ca.
* Please return completed demographic surveys to:
**Municipal Affairs, Aubin-Arsenault Building, 3 Brighton Rd., PO Box 2000, Charlottetown, PEI C1A 7N8**

**Please mark (X) the response(s) that best reflect you:**

1. Do you identify as a…?

○ Woman ○ Non-Binary

○ Man ○ Prefer not to say

○ Transgender Woman ○ Gender not listed, if you wish to identify, please list:

○ Transgender Man \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

○ Transgender Non-Binary

1. Do you identify as a member of the 2SLGBTQ+ community?

○ Yes ○ No ○ Prefer not to say

1. Do you identify as a senior (age 65 or older)?

○ Yes ○ No ○ Prefer not to say

1. Do you identify as a youth (age 29 or younger)?

○ Yes ○ No ○ Prefer not to say

1. Do you identify as a person with a disability?

○ Yes ○ No ○ Prefer not to say

1. What is your first language?

○ Prefer not to say

○ Please list: ­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Do you identify as a member of the Island’s Acadian community?

○ Yes ○ No ○ Prefer not to say

1. Do you identify as a member of an Indigenous group?

○ Yes ○ No ○ Prefer not to say

1. Racism is a social construct which means racialized community members can have racial meanings attributed to them in ways that negatively impact their social, political, and economic life. Although the term racialized is used to describe individuals or communities who are non-white, it may also include people impacted by anti-Semitism and Islamophobia, etc. Some groups may differently experience racism, racial biases, stereotypes and patterns of discrimination.

Based on the above definition, are you a member of a racialized community?

○ Yes ○ No ○ Prefer not to say

1. Do you identify as a Canadian citizen?

○ Yes ○ No ○ Prefer not to say