

**NISHNAWBE ASKI NATION (NAN)
ELECTION 2024 Nomination Form**

I, Chief _____,
(Please print name)

of the _____ hereby nominate
(Name of First Nation – Recognized NAN First Nation)

_____ of the _____
(Name of Nominee) (Name of First Nation)

for the position of: **GRAND CHIEF**

DEPUTY GRAND CHIEF

NOMINEE INFORMATION

Address First Nation/Municipality Province/Territory Postal Code

E-mail, if applicable (____) _____ - _____
Telephone Number

NOMINATOR INFORMATION as per **NAN Election Procedures 4.1 Nominations for Grand Chief and Deputy Grand Chief** *All nominations for Grand Chief and Deputy Grand Chiefs must be supported by and signed by three (3) NAN Chiefs (One (1) Nominator / Mover and two (2) seconders. ** Where one candidate is nominated for both Grand Chief and Deputy Grand Chief, that candidate's two (2) seconders shall apply to both positions).*

MOVER / NOMINATOR CONTACT INFORMATION

Address First Nation/Municipality Province/Territory Postal Code

E-mail, if applicable (____) _____ - _____
Telephone Number Signature Date

NOMINATION SECOND BY: Chief _____

Address First Nation/Municipality Province/Territory Postal Code

E-mail, if applicable (____) _____ - _____
Telephone Number Signature Date

NOMINATION SECOND BY: Chief _____

Address First Nation/Municipality Province/Territory Postal Code

E-mail, if applicable (____) _____ - _____
Telephone Number Signature Date

FOR USE BY ELECTORAL OFFICER ONLY:

Received by way of: Email _____ Fax: _____ Mail: _____ on (date) _____