

## CS2 – Nomination Documents

PLEASE PRINT IN BLOCK LETTERS

|                                                                                                                                     |  |                                                                                     |                                                             |
|-------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------|-------------------------------------------------------------|
| JURISDICTION (NAME OF SCHOOL DISTRICT)<br><b>KOOTENAY LAKE #8</b>                                                                   |  | TRUSTEE ELECTORAL AREA (TEA NUMBER OR AT LARGE)<br><b>AREA 7 - VILLAGE OF KASLO</b> |                                                             |
| We, the following electors of the above-named jurisdiction, hereby nominate:                                                        |  |                                                                                     |                                                             |
| NOMINEE'S LAST NAME<br><b>LANG</b>                                                                                                  |  | FIRST NAME<br><b>SHELLY</b>                                                         | MIDDLE NAME(S)<br>[REDACTED]                                |
| USUAL NAME OF PERSON NOMINATED IF DIFFERENT FROM ABOVE AND PREFERRED BY THE PERSON NOMINATED TO APPEAR ON THE BALLOT<br><b>DAWN</b> |  |                                                                                     |                                                             |
| RESIDENTIAL ADDRESS (STREET ADDRESS)<br>[REDACTED]                                                                                  |  | CITY/TOWN<br>[REDACTED]                                                             | POSTAL CODE<br>[REDACTED]                                   |
| MAILING ADDRESS IF DIFFERENT FROM RESIDENTIAL ADDRESS (STREET ADDRESS/PO BOX NUMBER)<br>[REDACTED]                                  |  | CITY/TOWN<br>[REDACTED]                                                             | POSTAL CODE<br>[REDACTED]                                   |
| As a Candidate for the office of:                                                                                                   |  |                                                                                     |                                                             |
| POSITION<br><b>BOARD OF EDUCATION TRUSTEE</b>                                                                                       |  | JURISDICTION (NAME OF SCHOOL DISTRICT)<br><b>KOOTENAY LK</b>                        | TRUSTEE ELECTORAL AREA (TEA NUMBER OR AT LARGE)<br><b>8</b> |

Each of us **affirms** that to the best of our knowledge, the above-named person nominated for office:

1. Is or will be on general voting day for the election, 18 years of age or older.
2. Is a Canadian citizen.
3. Has been a resident of British Columbia, as determined in accordance with section 42 of the *School Act*, for at least six months immediately preceding today's date.
4. Is not disqualified under the *School Act* or any other enactment from being nominated for, being elected to or holding office as a trustee, or otherwise disqualified by law.

A nominator **MUST** be a qualified elector of the trustee electoral area where the candidate is running. Elector qualifications are listed in section 40 and 41 of the *School Act*.

|                                                                                                                                                                |                                                                                                                                                                |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|
| NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)<br><b>SUZAN ELIENE HEWAT</b>                                                                                   | NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)<br><b>MAUREEN SYLVIA LEATHWOOD</b>                                                                             |
| RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)<br>IF NOMINATING AS A RESIDENT ELECTOR<br>[REDACTED]                                              | RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)<br>IF NOMINATING AS A RESIDENT ELECTOR<br>[REDACTED]                                              |
| PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)<br>IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR                                                  | PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)<br>IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR                                                  |
| <input checked="" type="checkbox"/> BY CHECKING THIS BOX YOU CONFIRM THAT YOU ARE A QUALIFIED ELECTOR IN THE JURISDICTION THE CANDIDATE IS RUNNING FOR OFFICE. | <input checked="" type="checkbox"/> BY CHECKING THIS BOX YOU CONFIRM THAT YOU ARE A QUALIFIED ELECTOR IN THE JURISDICTION THE CANDIDATE IS RUNNING FOR OFFICE. |
| NOMINATOR'S SIGNATURE<br>[REDACTED]                                                                                                                            | NOMINATOR'S SIGNATURE<br>[REDACTED]                                                                                                                            |

Please see over for additional space when more than two nominators are required. Copies can be made as needed.

I consent to the above nomination for office:

|                       |                                         |
|-----------------------|-----------------------------------------|
| NOMINEE<br>[REDACTED] | DATE: (YYYY/MM/DD)<br><b>2026/08/08</b> |
|-----------------------|-----------------------------------------|

# CANDIDATE NOMINATION PACKAGE – SCHOOL TRUSTEE

Each of us **affirms** that to the best of our knowledge, the above-named person nominated for office:

1. Is or will be on general voting day for the election, 18 years of age or older.
2. Is a Canadian citizen.
3. Has been a resident of British Columbia, as determined in accordance with section 42 of the *School Act*, for at least six months immediately preceding today's date.
4. Is not disqualified under the *School Act* or any other enactment from being nominated for, being elected to or holding office as a trustee, or otherwise disqualified by law.

A nominator **MUST** be a qualified elector of the trustee electoral area where the candidate is running. Elector qualifications are listed in section 40 and 41 of the *School Act*.

|                                                                                                                                                     |                                                                                                                                                     |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|
| NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)                                                                                                     | NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)                                                                                                     |
| RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)<br><b>IF NOMINATING AS A RESIDENT ELECTOR</b>                                          | RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)<br><b>IF NOMINATING AS A RESIDENT ELECTOR</b>                                          |
| PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)<br><b>IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR</b>                                | PROPERTY ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)<br><b>IF NOMINATING AS A NON-RESIDENT PROPERTY ELECTOR</b>                                |
| <input type="checkbox"/> BY CHECKING THIS BOX YOU CONFIRM THAT YOU ARE A QUALIFIED ELECTOR IN THE JURISDICTION THE CANDIDATE IS RUNNING FOR OFFICE. | <input type="checkbox"/> BY CHECKING THIS BOX YOU CONFIRM THAT YOU ARE A QUALIFIED ELECTOR IN THE JURISDICTION THE CANDIDATE IS RUNNING FOR OFFICE. |
| NOMINATOR'S SIGNATURE                                                                                                                               | NOMINATOR'S SIGNATURE                                                                                                                               |
| NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)                                                                                                     | NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)                                                                                                     |
| RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)<br><b>IF NOMINATING AS A RESIDENT ELECTOR</b>                                          | RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)<br><b>IF NOMINATING AS A RESIDENT ELECTOR</b>                                          |
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| NOMINATOR'S SIGNATURE                                                                                                                               | NOMINATOR'S SIGNATURE                                                                                                                               |
| NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)                                                                                                     | NOMINATOR'S NAME (FIRST, MIDDLE AND LAST NAMES)                                                                                                     |
| RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)<br><b>IF NOMINATING AS A RESIDENT ELECTOR</b>                                          | RESIDENTIAL ADDRESS (CITY/TOWN, STREET ADDRESS, POSTAL CODE)<br><b>IF NOMINATING AS A RESIDENT ELECTOR</b>                                          |
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| NOMINATOR'S SIGNATURE                                                                                                                               | NOMINATOR'S SIGNATURE                                                                                                                               |

## CS2 – Nomination Documents

PLEASE PRINT IN BLOCK LETTERS

I do solemnly declare as follows:

1. I am qualified under section 32 of the *School Act* to be nominated, elected and to hold the office of:

POSITION

BOARD OF EDUCATION TRUSTEE

2. I am or will be on general voting day for the election, 18 years of age or older.  
 3. I am a Canadian citizen.  
 4. I have been a resident of British Columbia, as determined in accordance with section 42 of the *School Act*, for the past six months immediately preceding today's date.  
 5. I am not disqualified by the *School Act* or any other enactment from being nominated for, being elected to or holding office as a trustee, or otherwise disqualified by law.  
 6. To the best of my knowledge, the information provided in these nomination documents is true.  
 7. I fully intend to accept the office if elected.  
 8. I am aware of and understand the requirements and restrictions of the *Local Elections Campaign Financing Act* and I intend to fully comply with those requirements and restrictions.

OR TAKING AFFIDAVITS FOR BRITISH COLUMBIA

AT: (LOCATION)

811 Stanley Street, Nelson

DATE: (YYYY/MM/DD)

September 8, 2026

☒ I am acting as my own Financial Agent


I have appointed as my Financial Agent

FINANCIAL AGENT'S NAME (IF APPLICABLE)

### ELECTOR ORGANIZATION CANDIDATE ENDORSEMENT AND CONSENT

NAME OF ELECTOR ORGANIZATION (AS REGISTERED WITH ELECTIONS BC):

PRINCIPLE OFFICIAL'S LAST NAME

FIRST NAME

MIDDLE NAME(S)

The above-named Elector Organization Agrees to Endorse:

CANDIDATE'S LAST NAME

FIRST NAME

MIDDLE NAME(S)

PRINCIPLE OFFICIAL'S SIGNATURE

DATE: (YYYY/MM/DD)

I consent to the endorsement by the above-named Elector Organization

CANDIDATE'S SIGNATURE

DATE: (YYYY/MM/DD)