

shishalh Nation NOMINATION ACCEPTANCE FORM

I(print name) agree to stand for	or office shíshálh Co	uncil or Chief (cire	cle one position)
for the following reason(s):			
I declare that I am not in any arrears to the shishalh Nation.			
Signature	Date		
I have read and understand the constitution.	yes	no	
I have attended shíshálh Nation meetings in the last year.	yes	no	
I have experience and knowledge of local government and finances.	yes	no	
I have read and understand the Chief and Council Policy.	yes	no	
I consent to a criminal record check.	yes	no	
I have attached a resume which I agree may be published for shishalh membership to see.	yes	no	

Please note that the information on this form may be publically released to shishalh membership.