

# ADVISORY COMMITTEE CANDIDATE NOMINATION FORM

2026

**Check List:**

- Nomination Form**
- Candidate Declaration**
- Criminal Record Check/Vulnerable Sector Screening Check (\*Must be within the last 6 months)**
- Criminal Free Declaration**
- Picture (candidates to email to: [acelection@lrib.ca](mailto:acelection@lrib.ca) )**

**IF AN INDIVIDUAL IS SEEKING ELECTION  
TO MORE THAN ONE ADVISORY  
COMMITTEE, A SEPARATE FORM MUST BE  
COMPLETED AND SUBMITTED FOR EACH  
ADVISORY COMMITTEE.**

**SECTION A: NOMINATION**

I \_\_\_\_\_ AM SEEKING CANDIDACY FOR THE  
ADVISORY COMMITTEE POSITION OF:

- |  |  |
|--|--|
| <input type="checkbox"/> <b>K-12 EDUCATION</b> | <input type="checkbox"/> <b>HEALTH</b>                                   |
| <input type="checkbox"/> <b>HOUSING</b>        | <input type="checkbox"/> <b>POST SECONDARY/DAY CARE &amp; HEAD START</b> |

IN THE COMMUNITY OF:

- |   |  |
|---|--|
| <input type="checkbox"/> <b>LITTLE RED RIVER</b>  | <input type="checkbox"/> <b>SUCKER RIVER</b> |
| <input type="checkbox"/> <b>HALL LAKE</b>         | <input type="checkbox"/> <b>LA RONGE</b>     |
| <input type="checkbox"/> <b>GRANDMOTHER'S BAY</b> |  |

-----  
**NOMINATOR:** \_\_\_\_\_  
Please Print

TREATY NUMBER: 3530 \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

-----  
**SECONDER:** \_\_\_\_\_  
Please Print

TREATY NUMBER: 3530 \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

-----  
 **I ACCEPT MY NOMINATION**

CANDIDATE: \_\_\_\_\_

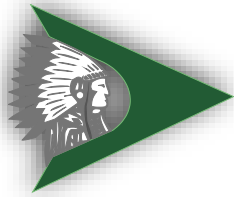
TREATY NUMBER: 3530 \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

-----





## ADVISORY BOARD CANDIDATE DECLARATION

I, \_\_\_\_\_, Treaty Number 353 \_\_\_\_\_

reside in the community of \_\_\_\_\_

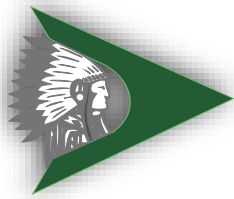
### DECLARE:

1. That I am the full age of eighteen (18) years.
2. That I am a Member of the Lac La Ronge Indian Band.
3. That I reside in the community to which I have been nominated.
4. That I have a Criminal Free Record and have signed a Criminal Free Declaration.
5. That I have no debt outstanding and unpaid to the LLRIB, including Band entities, businesses or corporations to which the Band is the majority shareholder or has a debt for which there is an existing agreement to repay
6. That I am able to demonstrate relevant experience or knowledge, abilities, and skills related to the mandate of the Advisory Committee.
7. That I live a healthy lifestyle and am a positive role model.
8. That I know of no other reason why I should be disqualified to run in this election.
9. I am aware that I will be disqualified if my Criminal Record Check is found to be not satisfactory or is not filed with the Electoral Officer.

*Declared before me at \_\_\_\_\_ in the province of  
Saskatchewan, this \_\_\_\_ day of \_\_\_\_\_, 2026*

\_\_\_\_\_  
*(Signature of Nominee)*

\_\_\_\_\_  
*Electoral Officer, Justice of the Peace, Notary  
Public/Commissionaire for Oaths for Saskatchewan.  
My appt. expires: \_\_\_\_\_*



## ADVISORY BOARD CRIMINAL FREE DECLARATION

I, \_\_\_\_\_, here declare that:

- 1) I have no convictions or outstanding charges for offences under the *Criminal Code of Canada* or the *Controlled Drugs and Substances Act*, or any successor legislation, up to and including the date of this declaration.
  
- 2) I have no other items from my personal, business or professional past that may be deemed embarrassing or detrimental to themselves or the LLRIB, hinder my ability to perform my duties as an elected official or demonstrate a lack of integrity.

Signed on \_\_\_\_ , \_\_\_\_ , \_\_\_\_ by \_\_\_\_\_  
(day) (month) (year) (printed name)

\_\_\_\_\_  
(signature)

In the presence of:

\_\_\_\_\_  
(printed name)

\_\_\_\_\_  
(signature)