



Check only one add applicant's name to list
 correct applicant's information on list - info to be corrected
 delete applicant's or family member's name from list (input type="checkbox"/> deceased input type="checkbox"/> moved input type="checkbox"/> other
If deceased, state relationship to deceased: _____

Name of applicant _____ date of birth [] [] [] [] [] [] [] []
last first middle

Citizenship: _____

Qualifying address on voting day input type="checkbox"/> commercial property
At qualifying address, applicant is:
input type="checkbox"/> owner since _____
input type="checkbox"/> tenant since _____
input type="checkbox"/> other since _____
input type="checkbox"/> spouse
input type="checkbox"/> unqualified (deleted name only)
street number & name apt. # roll number ward number
city postal code (if house apartment, indicate floor level - e.g., basement, 1st floor, etc.)

Previous qualifying address (if applicable)
At previous address, applicant was:
input type="checkbox"/> owner
input type="checkbox"/> tenant
input type="checkbox"/> other
input type="checkbox"/> spouse
street number & name apt. # roll number ward number
city postal code (if house apartment, indicate floor level - e.g., basement, 1st floor, etc.)

Current mailing address of applicant (if different than Qualifying address above)
At mailing address, applicant is:
input type="checkbox"/> owner
input type="checkbox"/> tenant
input type="checkbox"/> other
input type="checkbox"/> spouse
street number & name apt./unit City Postal Code

School Support

- input type="checkbox"/> Applicant is Roman Catholic (includes Greek & Ukrainian Catholics)
input type="checkbox"/> Applicant has French Language Education Rights

Applicant wishes to be an elector for the following school board

- input type="checkbox"/> English-Public (anyone can support English-public)
input type="checkbox"/> English-Separate (must be Roman Catholic)
input type="checkbox"/> French-Public (must have French Language Education Rights)
input type="checkbox"/> French-Separate (must be Roman Catholic & have French Language Education Rights)

I, the undersigned, hereby declare that I am a Canadian citizen, that I have attained the age of eighteen (18) on or before Voting Day, and that on Voting Day, I am entitled to be an elector in accordance with the facts or information submitted on this form, and that I understand the effect thereof. I hereby apply to have my name included or amendments made on the Voters' List in accordance with such facts or information.

_____ signature of applicant _____ date

This information is collected under authority of s. 17, s. 24 and s. 25 of the Municipal Elections Act and s.15 and s. 16 of the Assessment Act and will be used to determine voter eligibility.

Certificate of Approval (to be completed by Clerk or designate)
input type="checkbox"/> Approved input type="checkbox"/> Refused (state reason)

I hereby certify that the Voters' List for said ward in this municipality shall be amended in accordance with the statement of facts or information contained herein.

signature of clerk or designate _____ date