



APPLICATION TO AMEND VOTERS' LIST

Municipal Elections Act, 1996 (s.17, s.24, s.25)

FORM EL15

Check only one

add applicant's name to list

correct applicant's information on list

delete applicant's or family member's name from list: deceased moved other

Please confirm that you are a Canadian Citizen		Date of birth
Yes	No	

Last Name		First Name	Middle Name
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Qualifying address on voting day					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	Voting subdivision	Ward		
City	Postal code	(if house apartment, indicate floor level-e.g. basement, 1 st 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	Voting subdivision	Ward		
City	Postal code	(if house apartment, indicate floor level-e.g. basement, 1 st 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. #	City	Postal code			

School Support / Soutien scolaire	
<input type="checkbox"/>	Applicant is Roman Catholic
<input type="checkbox"/>	Applicant has French Language Education Rights (does not include French immersion nor French as a second language)

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 a Roman Catholic
<input type="checkbox"/>	French-Public must have French Language Education Rights
<input type="checkbox"/>	French-Separate must be Roman Catholic and 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) years 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
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Certificate of Approval (to be completed by Clerk or designate)	
Approved <input type="checkbox"/>	Refused (state reason) <input type="checkbox"/>
I hereby certify that the Voters' List for said voting subdivision in this municipality shall be amended in accordance with the statement of facts or information contained herein.	

Signature of Clerk or Designate	Date
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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.