



LP^{ᑭᑭ}ᑭ
Société Makivik
Makivik Corporation

NOMINATION FORM

I _____, HEREBY DECLARE MY INTENTION TO RUN FOR THE

POSITION OF: _____

SIGNATURE: _____

DATED AT _____, NUNAVIK, QUEBEC, _____, 2015.

BENEFICIARY #: _____

SOCIAL INSURANCE #: _____

DATE OF BIRTH: _____

NOMINATORS (10)

(a) Nominators at Large (at least 10 nominators of which at least 5 reside in different Nunavik Inuit communities)

- | | | |
|---------------------------------|-----------------------------|---|
| 1. _____
Name | _____
Beneficiary Number | _____
I confirm by my signature that the candidate is fluent in Inuktitut. |
| _____
Residence of Nominator | | |
| 2. _____
Name | _____
Beneficiary Number | _____
I confirm by my signature that the candidate is fluent in Inuktitut. |
| _____
Residence of Nominator | | |
| 3. _____
Name | _____
Beneficiary Number | _____
I confirm by my signature that the candidate is fluent in Inuktitut. |
| _____
Residence of Nominator | | |
| 4. _____
Name | _____
Beneficiary Number | _____
I confirm by my signature that the candidate is fluent in Inuktitut. |
| _____
Residence of Nominator | | |
| 5. _____
Name | _____
Beneficiary Number | _____
I confirm by my signature that the candidate is fluent in Inuktitut. |

Residence of Nominator

6. _____
Name

Beneficiary Number

I confirm by my signature that the candidate is fluent in Inuktitut.

Residence of Nominator

7. _____
Name

Beneficiary Number

I confirm by my signature that the candidate is fluent in Inuktitut.

Residence of Nominator

8. _____
Name

Beneficiary Number

I confirm by my signature that the candidate is fluent in Inuktitut.

Residence of Nominator

9. _____
Name

Beneficiary Number

I confirm by my signature that the candidate is fluent in Inuktitut.

Residence of Nominator

10. _____
Name

Beneficiary Number

I confirm by my signature that the candidate is fluent in Inuktitut.

Residence of Nominator

(b) Attestation of a Makivik Director (3) (N.B. an incumbent Executive Director is exempt from obtaining the following signatures)

1. _____
Name of Director (Makivik)

Beneficiary Number

I confirm by my signature that the candidate is fluent in Inuktitut.

2. _____
Name of Director (Makivik)

Beneficiary Number

I confirm by my signature that the candidate is fluent in Inuktitut.

3. _____
Name of Director (Makivik)

Beneficiary Number

I confirm by my signature that the candidate is fluent in Inuktitut.

(c) General Declaration

I, _____, ALSO HEREBY ATTEST AND DECLARE AS FOLLOWS:

1. THAT I am entitled to exercise my rights or receive benefits under the *Act Respecting Cree, Inuit and Naskapi Native Persons* (RLRQ, chap. A-33.1) ;
2. THAT I am not an undischarged bankrupt;
3. THAT I am a beneficiary of the *James Bay and Northern Quebec Inuit Agreement*;
4. THAT I have not been convicted of an indictable offense punishable by imprisonment for two (2) years or more; and THAT if such has been the case, it has been more than five (5) years after the term of imprisonment fixed by the sentence thereto; and THAT, if only a fine had been imposed or the sentence had been suspended, that it has been more than five (5) years since the date of the conviction, unless the person has obtained a pardon for such indictable offense;
5. THAT I do not have any outstanding debts of any nature or kind with the corporation and/or one of its subsidiaries which have remained unpaid for more than ninety (90) days, or THAT I have not failed in the past to honour a debt which remains unpaid to the Corporation and/or one of its subsidiaries;
6. THAT I am fluent in Inuktitut.
7. THAT I am not an employee of the Corporation, other than as an Executive Director, or one of its subsidiaries;
8. THAT my actions, activities or relationships would not have, directly or indirectly, the effect of disqualifying the Corporation and/or its affiliates from eligibility for contracts with any public body, as per the following declaration.

SIGNATURE OF NOMINEE: _____

DATED AT _____, NUNAVIK , QUEBEC, _____, 2015.

(d) Declaration of Interest

I, _____, ALSO HEREBY ATTEST AND DECLARE AS FOLLOWS: (please circle your answer and provide details if necessary. If you require extra space please attach additional pages.)

i) (**YES** / **NO**) As of the present date or for the previous 5 years, I am/was the owner of a business, either as a sole proprietor, shareholder of a corporation or a partner in a partnership, whether active or inactive.

If **YES**: please state the names of the enterprise(s), businesses, corporations or partnerships for which you are or for which you were an owner.

ii) (**YES** / **NO**) As of the present date or for the previous 5 years, I am/was the director or officer of a corporation (including a Landholding Corporation; non-profit corporation; cooperative), whether active or inactive.

If **YES**: please state the names of the enterprise(s), businesses, corporations or partnerships for which you act or acted as a director or officer.

iii) (**YES** / **NO**) To my knowledge, the enterprise(s) that I own/owned or for which I act/acted as a director or officer; has/have been found guilty, within the past 5 years, of a criminal or penal offence, in Canada or abroad, that would have prevented it from being eligible to bid on contracts with any public body.

If **YES**: please list the criminal or penal infractions of the enterprise, for which it has been found guilty, that it had committed within the past 5 years.

I hereby attest that the foregoing information provided is accurate, and furthermore I authorize the Chief Returning Officer to verify the veracity of all of the information submitted hereinabove with law enforcement authorities for the purposes of establishing my qualification or disqualification as a candidate for election as a director of the Makivik Corporation.

SIGNATURE OF NOMINEE: _____

DATED AT _____, NUNAVIK, QUEBEC, _____, 2015.