

2. _____

ᐱᑎᓃ ᐃᓚᐅᑦᑕᑎᓃ ᑭᑎᓚᑎᓃ ᐱᑎᓚᐅᓃᑭᑕ ᑦᓚᓚᓃᑎᓃ ᓂᑭᐱᓃᑕᐅᑎᓂᑦᑕᓃᑭ ᐃᓂᓃᑎᑦᑕᑦᑕᑭᑦᑕᑭ

3. _____

ᐱᑎᓃ ᐃᓚᐅᑦᑕᑎᓃ ᑭᑎᓚᑎᓃ ᐱᑎᓚᐅᓃᑭᑕ ᑦᓚᓚᓃᑎᓃ ᓂᑭᐱᓃᑕᐅᑎᓂᑦᑕᓃᑭ ᐃᓂᓃᑎᑦᑕᑦᑕᑭᑦᑕᑭ

4. _____

ᐱᑎᓃ ᐃᓚᐅᑦᑕᑎᓃ ᑭᑎᓚᑎᓃ ᐱᑎᓚᐅᓃᑭᑕ ᑦᓚᓚᓃᑎᓃ ᓂᑭᐱᓃᑕᐅᑎᓂᑦᑕᓃᑭ ᐃᓂᓃᑎᑦᑕᑦᑕᑭᑦᑕᑭ

5. _____

ᐱᑎᓃ ᐃᓚᐅᑦᑕᑎᓃ ᑭᑎᓚᑎᓃ ᐱᑎᓚᐅᓃᑭᑕ ᑦᓚᓚᓃᑎᓃ ᓂᑭᐱᓃᑕᐅᑎᓂᑦᑕᓃᑭ ᐃᓂᓃᑎᑦᑕᑦᑕᑭᑦᑕᑭ

(<) ᐱᑭᑦᑕᑦᑕ ᓃᓃᓂᓃᑦᑕᑎᓃ ᐱᓚᓂᓃᓂᓃ ᓂᑭᐱᓃᑕᐅᑎᓂᑦᑕᓃᑭ ᓂᓂᓂᓂᓂ ᓂᓂᑭ ᑎᑕᑭᐱᓃᑎᓂᓃ ᑭᑎᐱᓂᓂ ᓂᓂᓂᓂᓂᓂ (2)

1. _____

ᐱᑎᓃ ᑭᑎᐱᓂᓂ (<ᐱᑭᑦᑕᑦᑕ ᓂᓂᑭ ᐃᓚᐅᑦᑕᑎᓃ ᑭᑎᓚᑎᓃ ᐱᑎᓚᐅᓃᑭᑕ ᑦᓚᓚᓃᑎᓃ ᓂᑭᐱᓃᑕᐅᑎᓂᑦᑕᓃᑭ ᑎᑕᑭᐱᓃᑎᓂᓃᓂᓃ) ᐃᓂᓃᑎᑦᑕᑦᑕᑭᑦᑕᑭ

2. _____

ᐱᑎᓃ ᑭᑎᐱᓂᓂ (<ᐱᑭᑦᑕᑦᑕ ᓂᓂᑭ ᐃᓚᐅᑦᑕᑎᓃ ᑭᑎᓚᑎᓃ ᐱᑎᓚᐅᓃᑭᑕ ᑦᓚᓚᓃᑎᓃ ᓂᑭᐱᓃᑕᐅᑎᓂᑦᑕᓃᑭ ᑎᑕᑭᐱᓃᑎᓂᓃᓂᓃ) ᐃᓂᓃᑎᑦᑕᑦᑕᑭᑦᑕᑭ

(C) ልዩ ልዩ ደንብ

ይህም _____ ደንብ ለሌሎች ልዩ ልዩ ደንቦች ለማድረግ ይህን ደንብ አዘጋጅቶታል፡

1. ለሌሎች ልዩ ልዩ ደንቦች ለማድረግ ይህን ደንብ አዘጋጅቶታል፡
 2. ደንብ ለማድረግ ይህን ደንብ አዘጋጅቶታል፡
 3. ለሌሎች ልዩ ልዩ ደንቦች ለማድረግ ይህን ደንብ አዘጋጅቶታል፡
 4. በሌሎች ልዩ ልዩ ደንቦች ለማድረግ ይህን ደንብ አዘጋጅቶታል፡
- ሌሎች ልዩ ልዩ ደንቦች ለማድረግ ይህን ደንብ አዘጋጅቶታል፡

5. ለሌሎች ልዩ ልዩ ደንቦች ለማድረግ ይህን ደንብ አዘጋጅቶታል፡

ይህን ደንብ ለማድረግ ይህን ደንብ አዘጋጅቶታል፡

6. ለሌሎች ልዩ ልዩ ደንቦች ለማድረግ ይህን ደንብ አዘጋጅቶታል፡

7. ለሌሎች ልዩ ልዩ ደንቦች ለማድረግ ይህን ደንብ አዘጋጅቶታል፡

8. ለሌሎች ልዩ ልዩ ደንቦች ለማድረግ ይህን ደንብ አዘጋጅቶታል፡

ይህን ደንብ ለማድረግ ይህን ደንብ አዘጋጅቶታል፡

ይህን ደንብ ለማድረግ ይህን ደንብ አዘጋጅቶታል፡

ይህን ደንብ ለማድረግ ይህን ደንብ አዘጋጅቶታል፡ 2023.

(b) ደንብ ለማድረግ ይህን ደንብ አዘጋጅቶታል፡

COMMUNITY DIRECTORS' NOMINATION FORM

I _____, HEREBY DECLARE MY INTENTION TO RUN FOR \

THE POSITION OF BOARD OF DIRECTOR FOR THE COMMUNITY OF: _____

SIGNATURE: _____

DATED AT _____, NUNAVIK, QUEBEC, _____, 2023.

BENEFICIARY #: _____

SOCIAL INSURANCE #: _____

DATE OF BIRTH: _____

Phone Number: _____

Email Address: _____

NOMINATORS (5)

(a) Nominators at Large (5): please obtain names, beneficiary numbers and signatures of members of the Corporation that are of the age of majority, affiliated with your community and ordinarily resident therein.

1. _____

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

2. _____

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

3. _____

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

4. _____

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

5. _____

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

(b) Attestation of a Makivvik Executive Director and/or a Director of the Landholding Corporation of the Community for Which the Nominee is Presenting His Candidacy (2)

1. _____

Name of Director (Makivvik or LHC) Beneficiary Number I confirm by my signature that the candidate is fluent in Inuktitut.

2. _____

Name of Director (Makivvik or LHC) 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 affiliated and ordinarily residing in the mentioned community;
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 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, _____, 2023.

(d) Declaration of Interest

I, _____, ALSO HEREBY ATTEST AND DECLARE AS FOLLOWS: (please circle your answer and provide details if necessary)

- 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.

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).

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, _____, 2023.

The deadline to send the completed nomination forms is:

Wednesday, March 1st 2023 before 5:00 P.M.

Fax: 514-745-0364

or

email: elections@makivik.org