

THE REGIONAL AUTHORITY OF \_\_\_\_\_

FRANCOPHONE EDUCATION REGION NO. \_\_\_\_\_, PROVINCE OF ALBERTA

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

VOTING SUBDIVISION OR WARD (If Applicable): \_\_\_\_\_

VOTING STATION: \_\_\_\_\_

**Part I  
To be completed by Elector**

**STATEMENT OF ELECTOR ELIGIBILITY**

I, \_\_\_\_\_  
(name of elector)

of \_\_\_\_\_  
(street address of residence or legal land description, mailing address and postal code)

am eligible to vote at the above mentioned election because:

- I have not voted before in this election;
- I am 18 years of age or older;
- I am a Canadian citizen;
- I have resided in Alberta for the 6 consecutive months immediately preceding Election Day; and
- I am entitled to receive a Special Ballot because I will not be able to attend advance voting stations, if any, or the voting station established for my local jurisdiction, due to physical incapacity, absence from the local jurisdiction or being a returning officer, deputy returning officer, constable, candidate, official agent or scrutineer.

And at least one of the following criteria is applicable:

- I have a child enrolled in a school operated by the above noted Regional authority;
- I am an individual who was enrolled as a student in a school operated by a Regional authority and received an Alberta High School Diploma or Certificate from a Regional authority;
- I am the biological or adoptive parent of an individual who was enrolled as a student in a school operated by a Regional authority and that individual received an Alberta High School Diploma or Certificate from a Regional authority; and/or
- I am eligible to vote for:

Where applicable: (Check [√] One)

- A Francophone Public School member
- A Francophone Separate School member

I declare that the above statements are true.

Dated at \_\_\_\_\_  
(address, including postal code, where Special Ballot Certificate Envelope is received)

this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_  
(date) (month) (year)

\_\_\_\_\_  
(Signature of Elector)

**IT IS AN OFFENCE TO SIGN A FALSE STATEMENT**

**Part II**  
**To be completed by Returning Officer**

CHECK:

- Name of the individual recorded on the front of envelope is recorded in the Special Ballot Voting Register.
- Part I is properly completed.
- Identification attached (if applicable).
- Special Ballot Certificate Envelope IS accepted.

OR

Special Ballot Certificate Envelope IS NOT opened because:

- Part I is not properly completed;
- Identification is not attached (if applicable); or
- Received after the close of voting stations on Election Day.

Date and Time Received:  _____
_____ (Initials of Returning Officer)

NOTE :

The personal information that is being collected under the authority of the *Local Authorities Election Act* and the *School Act* will be used for the purposes under those Acts. It is protected by the privacy provisions of the *Freedom of Information and Protection of Privacy Act*.

If you have any questions about the collection, contact

\_\_\_\_\_  
(title and business phone number of the responsible official)