



# KIA Elections 2025

## Nomination for Community Director (Chesterfield Inlet)

| <b>Part 1 - Candidate Information</b> |            |
|---------------------------------------|------------|
| First Name:                           | Last Name: |
| Community:                            |            |
| Residential Address:                  |            |
| Phone Number:                         | Email:     |

| <b>Part 2 – Candidate Name for Ballot</b>                                                                                       |            |
|---------------------------------------------------------------------------------------------------------------------------------|------------|
| Print your name clearly in both Roman orthography and syllabics, as you would like it to appear on the ballot. Last name first. |            |
| Last Name                                                                                                                       | First Name |
| Your Name in Syllabics:                                                                                                         |            |
| Last Name                                                                                                                       | First Name |
| Your Name in Roman orthography:                                                                                                 |            |

| <b>Part 3 – Financial Agent Information</b>                                                                                                                                                                                                                                                                                                                                                                                                                         |                         |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|
| Name of Financial Agent:                                                                                                                                                                                                                                                                                                                                                                                                                                            |                         |
| Community:                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                         |
| Mailing Address:                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                         |
| Phone Number:                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Email:                  |
| <p><b>Declaration:</b></p> <p>I, _____, am aware of and agree to perform the duties of a financial agent for _____. I am aware I start my job as financial agent as soon as I sign this declaration. I understand that the candidate and I must prepare and file a complete and accurate financial return before the end of the post-election period (February 6, 2026). If we fail to do this, we will not be eligible to be a candidate in the next election.</p> |                         |
| Signature of Financial Agent                                                                                                                                                                                                                                                                                                                                                                                                                                        | Date                    |
| Signature of Witness                                                                                                                                                                                                                                                                                                                                                                                                                                                | Printed Name of Witness |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Date                    |



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| <b>Part 4 – Nominations</b>                                                                                                                                                                                                                                                                                                           |              |           |           |      |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------|-----------|------|
| I, the undersigned, consent to the candidacy of the person named in this paper. I am an eligible voter at this election. An eligible voter is 16 years of age or older on Election Day; a beneficiary under the Nunavut Agreement; has applied and been accepted by an Enrolment Committee in a community within the Kivalliq Region. |              |           |           |      |
| #                                                                                                                                                                                                                                                                                                                                     | Printed Name | Signature | Community | Date |
| 1                                                                                                                                                                                                                                                                                                                                     |              |           |           |      |
| 2                                                                                                                                                                                                                                                                                                                                     |              |           |           |      |
| 3                                                                                                                                                                                                                                                                                                                                     |              |           |           |      |
| 4                                                                                                                                                                                                                                                                                                                                     |              |           |           |      |
| 5                                                                                                                                                                                                                                                                                                                                     |              |           |           |      |
| 6                                                                                                                                                                                                                                                                                                                                     |              |           |           |      |
| 7                                                                                                                                                                                                                                                                                                                                     |              |           |           |      |
| 8                                                                                                                                                                                                                                                                                                                                     |              |           |           |      |
| 9                                                                                                                                                                                                                                                                                                                                     |              |           |           |      |
| 10                                                                                                                                                                                                                                                                                                                                    |              |           |           |      |

| <b>Part 5 - Declaration of Candidate</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>I, the undersigned consent to the above nomination and declare that I am eligible to be a candidate for Kivalliq Inuit Association Community Director for Chesterfield Inlet, as per KIA 2021 By-Laws and 2021 Election Policy. In particular that I am:</p> <ul style="list-style-type: none"> <li>✓ at least 16 years old by voting day;</li> <li>✓ included on the Nunavut Inuit Enrolment List maintained by NTI who has applied and been accepted by an Enrolment Committee in a community within the Kivalliq region;</li> <li>✓ not a member of any Federal or Territorial government or am seeking to be elected to any such office;</li> <li>✓ not indebted to the KIA in the amount of \$500 or more for more than three months on the day nominations open;</li> <li>✓ not a candidate for more than one position with KIA;</li> <li>✓ have terminated my position as a Director of KIA, if such a position was held.</li> </ul> |



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|                                 |                                  |               |
|---------------------------------|----------------------------------|---------------|
| _____<br>Signature of Candidate |                                  | _____<br>Date |
| _____<br>Signature of Witness   | _____<br>Printed Name of Witness | _____<br>Date |

### Part 6 – Submit Your Nomination

Completed nomination forms must be received by the CRO or Office of the CRO no later than 3:00 pm local time on Monday, November 3, 2025. Faxed and scanned copies will be accepted.

Chief Returning Officer (CRO)  
Monica Ell-Kanayuk  
Tel: 867-645-7530  
Fax: 613-727-6910  
Email: [kiacro@ayaya.ca](mailto:kiacro@ayaya.ca)

Office of the CRO  
Julia Roberts  
Tel: 867-222-9388  
Fax: 613-727-6910  
Email: [juliar@ayaya.ca](mailto:juliar@ayaya.ca)