

**NATIVE TRIBE OF KANATAK
KANATAK TRIBAL COUNCIL
PO BOX 872231
WASILLA ALASKA 99687
(907) 357-5991/(907) 357-5992 FAX
1-888-715-7271 TOLL FREE
kanatak@mtaonline.net EMAIL
WWW.KANATAK.COM**

Nomination Form for the Kanatak Tribal Council

Completed forms may be mailed, faxed (907-357-5992) or email (kanatak@mtaonline.net) to the Kanatak Tribal Office.

SELF NOMINATION:

Fill out this section if you wish to nominate **yourself** to run for a vacant seat on the Kanatak Tribal Council.

I, _____, hereby nominate myself to enter the election for the Kanatak Tribal Council. I certify that I am eligible to hold office with the Kanatak Tribal Council and all information provided by me is true and correct.

Signature: _____ **Date:** _____

Printed Name: _____

NOMINATION BY MEMBER:

Fill out this section if you wish to nominate another tribal member to run for a vacant seat on the Kanatak Tribal Council.

I, _____, hereby nominate _____ to enter the election for the KTC.

To the best of my knowledge, I certify that:

1. _____ (enter name of person you are nominating) is eligible to hold office with the KTC.
2. I am eligible to participate in the KTC election process.
3. I further certify all information provided by me is true and correct.

Signature: _____ **Date:** _____

Printed Name: _____

This form is not valid without a signature, legible printed name and date.

CONTACT INFORMATION:

NOMINEE: <small>(Person nominated to run for Council)</small>	NOMINATOR: <small>(Person nominating another member to run for Council)</small>
Name: _____	Name: _____
Mailing Address: _____ _____ _____	Mailing Address: _____ _____ _____
Telephone Number(s): Home: _____ Work: _____ Cell: _____	Telephone Number(s): Home: _____ Work: _____ Cell: _____
Date of Birth: _____	Date of Birth: _____
Enrollment Number: _____	Enrollment Number: _____

OFFICE USE ONLY:

Date Received: _____
Eligibility Verified: Yes No
Letter Sent to Nominee: Yes No