SCOTTISH BORDERS COUNCIL

COMMUNITY COUNCIL ELECTIONS 2024

UPPER TWEED COMMUNITY COUNCIL

NOMINATION FORM Please read notes overleaf and then complete Sections 1 and 2 in BLOCK CAPITALS

SECTION 1 - CANDIDATE

SURNAME (AS IN ELECTORAL REGISTER)	OTHER NAMES (AS IN ELECTORAL REGISTER)	MR / MRS / MISS / MS	(See Note 2) Letter or Number	JMBER Electoral Number	ADDRESS EMAIL TEL NO.

SECTION 2 - PROPOSER AND SECONDER

	SURNAME (AS IN ELECTORAL	OTHER NAMES (AS IN ELECTORAL	MR / MRS / MISS / MS	ELECTORAL NUMBER (See Note 2)		ADDRESS (AS IN ELECTORAL REGISTER)
	REGISTER)	REGISTER)		Letter or Number	Electoral Number	
Proposer						
Seconder						

We hereby nominate as a candidate for election the person named in Section 1 above, who, to the best of our knowledge and belief is eligible for such election, as a member of

Upper Tweed Community Council (Note 1)

PLEASE NOTE THAT	YOU MAY ONLY	PROPOSE OR SECON	D ONE PERSON

Signature of Proposer	
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ACCEPTANCE OF NOMINATION	
I, the nominee for election, named in Section 1 above, consent to be nominated as a candidate for the abovementioned Community Council and, if elected, will accept office as a member of the said Community Council and agree to comply with the Code of Conduct for Community Councillors. I confirm that I have not served a prison sentence (including suspended sentence) of three months or more in the five years before the election.	ıe

NOTES

QUALIFICATIONS FOR ELECTION

A person seeking election to a Community Council must be aged 16 or over and appear on the Electoral Register for the Community Council area at the date of being proposed for membership of the Community Council, or provide proof of eligibility as advised by the Returning Officers, and must not have served a prison sentence (including a suspended sentence) of three months or more in the five years before the election. Each Candidate shall be nominated by a Proposer and a Seconder, both being persons whose names appear in the said Electoral Register for the respective Community Council area, or sub-division of that area, where applicable.

COMPLETED NOMINATION FORMS SHOULD BE LODGED:

Signature of Seconder

at the Broughton Village Store, ML12 6HQ or sent by email to the Returning Officer – email <u>birchall@oldmanse.org.uk</u> no later than Noon on Friday 10th May 2024.