



**Squaxin Island Tribe
Candidacy Response Form**

This form allows for the acceptance or rejection of a nomination for candidacy for a position on the Squaxin Island Tribal Council in the forthcoming election.

The election will take place following the finalization of candidates and may require run-off election if a majority vote (more than 50%) by the General Council is not reached.

To be eligible for candidacy you must be an enrolled member of the tribe, eighteen (18) years or older, and have been domiciled (lived) within a fifty-mile radius from any point on Squaxin Island for one year immediately preceding this election.

Candidate Name: _____

Enrollment Number: _____

Position of Nomination Responding to (check one)

Council Chairman

Council Member 1

Council Member 2

Indicate your response to the nomination by checking the appropriate box below and then provide your statement, if any.

I Accept Nomination

I Decline Nomination

I am an enrolled member of the Squaxin Island Tribe and eligible to run in this election and by my signature, I declare my response to run as a candidate in the previously marked nomination. I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct to the best of my knowledge, information, and belief.

Signature
(physical or digital signature acceptable)

Date

In order for Candidacy terms to be met, the candidate will need to record a video of no more than 3 minutes declaring acceptance and submit it to the elections committee. The Elections Committee will provide you with a recording station at or near the Squaxin Island Tribal Center if preferred.

This form and a recorded video of acceptance must be received by 4:00 PM on June 26th, 2020 at:

Squaxin Island Tribe Elections Committee
10 SE Squaxin Ln
Shelton, WA 98584

OR emailed with electronic or physical signatures to:

elections@squaxin.us