



Secondary School Student Application for Election Work - October, 2019 PRINT CLEARLY

Last Name:		First Name:			
Primary Phone: Alternat			e Phone:		
Email Address:					
House Address:				Postal Cod	de:
Secondary School:			Teacher Reference:		
Elementary School you attended:		Current Grade:			
	& Sun., Oct 11 & 13)Ordinary Voting) g Day (Mo	n., Oct. 21)	ting 2 Day	
Number the positions you would like				l Clerk	Information Officer
Job Descriptions available from school's Career Education Coordinator.					
Briefly describe / list any training or experiences you have that would support your application					
Confirm the following: I will at least 16 years of the least 16	district of Burnaby	North–Se	ymour/Burnaby So	g, etc.)	
Please tally the number of Valid V	otes Cast				
Candidate A received 233 votes; Ca	indidate B received	l a total 32	2; Candidate C red	ceived a to	tal of 232
	BALLOT PAPERS	COUNTED	FOR CANDIDATE	S	
	Candid Candid Candid Valid Votes	late B late C	ıl		
Signature of Student	Signati	ure of Sup	porting Teacher:_		
Permission from Parent/Guardian (Signature):				