

Office Use only	Date received	Time received	Initials	No.

1

Community Council Election

Nomination paper

ELECTION OF A COMMUNITY COUNCILLOR for	
Methlick	Community Council
Closing date for nomination forms	Thursday, 24 May 2018
Date of election (if required)	Tuesday, 5 June 2018

I, the undersigned, am hereby nominated as a candidate at the said election.

Candidate's Details

Candidate's surname	
Other names in full	
Commonly used surname (if any)	
Commonly used forenames (if any)	
Home address in full	

I, the nominee for election, consent to being nominated as a candidate for

Methlick	Community Council
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I declare that I am qualified to be elected in terms of Section 6.1 of Aberdeenshire Council's Scheme for the Establishment of Community Councils

I am 16 years or over

and / or	a. I am on the Electoral Register and I reside in the area of the Community Council My electoral number is: _____ or I have had their ordinary or principle residence in the area of the Community Council for at least three months prior to nomination
	b. I am permanently employed, or carry out regular self-employed work in the area of the Community Council

and / or	c. I own a business in the area of the Community Council
Candidate's signature	
Date	
Witness: I confirm the above-mentioned candidate signed the declaration in my presence.	
Witness's signature:	
Witness (name in full):	
of (address in full):	
Date	

Deliver to the **Returning Officer** by no later than **4pm** on **Thursday 24 May 2018**

Returning Officer

Elaine Brown
 Formartine Area Office
 Aberdeenshire Council
 29 Bridge Street
 Ellon
 AB41 9AA

A candidate who is qualified by more than one qualification may select all of those that may apply.

FAIR PROCESSING NOTICE

WHO MAY PROCESS YOUR PERSONAL DATA?

The information which you provide on this form will be processed by the the Returning Officer, which is a Data Controller of this information for the purposes of the Data Protection Act 1998.

WHAT PERSONAL DATA WILL BE COLLECTED?

The information which you provide on this form. This includes:

- Name and Address (candidate and witness)
- Electoral Details (candidate only)
- Qualification for nomination under Aberdeenshire Council's Scheme for the Establishment of Community Councils (candidate only)

FOR WHAT PURPOSES WILL YOUR PERSONAL DATA BE USED?

The information which you provide on the attached form will be used by the Returning Officer, for the following purposes:

- For the consideration of nominations to Community Councils under Aberdeenshire Council's Scheme for the Establishment of Community Councils

WILL THE RETURNING OFFICER DISCLOSE YOUR PERSONAL DATA TO ANYONE ELSE?

Anyone is entitled to see the nomination papers of a validly-nominated candidate at a public election.

IF YOU HAVE ANY QUERIES REGARDING COMPLETION OF THIS FORM, OR REQUIRE FURTHER ASSISTANCE, PLEASE CONTACT:

The Formartine Area Office on: Tel: 01467 530853

CONSENT

(Please tick to confirm)

Candidate Witness

I confirm that I have read and understood the fair processing notice

I understand that I have the right to withdraw consent in the future

Name (Candidate)

Date

Signature

Name (Witness)

Date

Signature