



The Corporation of
THE TOWNSHIP OF MELANCTHON
 157101 Highway 10, Melancthon, Ontario, L9V 2E6

FORM EL15

Application to Amend Voters' List *Municipal Elections Act, 1996 (s.17, s.24, s.25)* **Form EL15**

- Check only one add applicant's name to list
 correct applicant's information on list
 delete applicant's or family member's name from list (deceased moved other)

Name of applicant _____ date of birth

year	month	day

last first middle

Qualifying address on voting day commercial property At qualifying address, applicant is:

street number & name apt. # roll number ward voting number subdiv. owner since _____
 tenant since _____
 other since _____
 spouse or s.s.p. date _____
 unqualified (deleted name only)

city postal code (if house apartment, indicate floor level - e.g. basement, 1st floor, etc.)

Previous qualifying address (if applicable) At previous address, applicant was:

street number & name apt. # roll number ward voting number subdiv. owner
 tenant
 other
 spouse or s.s.p.

city postal code (if house apartment, indicate floor level - e.g. basement, 1st floor, etc.)

Current mailing address of applicant (if different than Qualifying address above) At mailing address, applicant is:

street number & name apt. / unit # city postal code owner
 tenant
 other
 spouse or s.s.p.

- School Support**
- Applicant is Roman Catholic (includes Greek & Ukrainian Catholics)
 Applicant has French Language Education Rights
- s.s.p. = same sex partner

- Applicant wishes to be an elector for the following school board**
- English-Public (anyone can support English-public)
 English-Separate (must be Roman Catholic)
 French-Public (must have French Language Education Rights)
 French-Separate (must be Roman Catholic & have French Language Education Rights)

I, the undersigned, hereby declare that I am a Canadian citizen, that I have attained the age of eighteen (18) on or before Voting Day, and that on Voting Day, I am entitled to be an elector in accordance with the facts or information submitted on this form, and that I understand the effect thereof. I hereby apply to have my name included or amendments made on the Voters' List in accordance with such facts or information.

 signature of applicant date

This information is collected under authority of s.17, s.24 and s.25 of the Municipal Elections Act and s. 15 and s.16 of the Assessment Act and will be used to determine voter eligibility.

Certificate of Approval (to be completed by Clerk or designate) Refused (state reason)

Approved

I hereby certify that the Voters' List for said voting subdivision in this municipality shall be amended in accordance with the statement of facts or information contained herein.

 signature of clerk or designate date