



PEGUIS FIRST NATION Surrender Claim Trust Trustee Application Form

Position Applied For: Financial Trustee Community Fund Trustee

Applying as On or Off Reserve Trustee: Reside On-Reserve Reside Off Reserve

Peguis Band Member: Yes No Membership Number: _____

Place of Residence: Reside On-Reserve Reside Off Reserve

Legal Name: _____
Last name _____ First Name _____ Middle Name _____

Date of Birth _____
Date _____ Month _____ Year _____

Are you a resident of Canada: Yes No

Contact Number:

Home: () _____ Business: () _____ Cellular: () _____

Home Address: _____

City/Town _____ Province _____ Postal Code _____

Email Address: _____

**Education:**

Name & Location of Educational Institution	Grade/Degree Obtained	Major	Date Attended/Obtained

Note: All persons applying to be nominated as a Trustee **must** provide proof of educational achievements.

Employment and Other Related Experience:

Start with the most recent experience. Describe your knowledge, skills and abilities that demonstrate your qualifications for the trustee position for which you are applying.

Position/Title			
Job Description			
Employer			
Employee Address			
Reference Contact Number			

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Member of a Professional Body:

Persons that are members of a professional body which regulates his or her employment or business activities **must** provide proof of membership in good standing.

Job Skills:

Use the following space to provide any additional information that you think would be helpful in our evaluation of your trustee application. This can be including specialization training, seminars, workshops, accreditations, special achievements or valuable skills.

References:

Please provide reference letters from minimum of 2 and not more than 3 persons that are not of whom are relations. From the references there should be detailing your education or experience relative to the Trustee Positions, and one should detail your character and integrity as a person. List the full name, address, contact number and relationship of up to 3 persons that you would like to use as reference:

Full Name	Address	Contact Number	Relationship



Financial: No person presently or recently insolvent and/or in bankruptcy will be nominated.

Are you now, or have you ever declared or been petitioned into bankruptcy: Yes No

If yes, please provide details:

Are you presently or recently insolvent: Yes No

If yes, please provide details:

Credit Score:

All persons applying to be nominated as Trustee must provide current credit score from either Equifax Canada or TransUnion Canada.

Criminal Record:

All persons applying to be nominated as Trustee are subject to a criminal record check.

Have you ever been convicted of any criminal code violations: Yes No

If yes, please provide details:

Adult/Child Abuse Registry Check:

All persons applying to be nominated as Trustee must provide a current Child Abuse Registry Check, 1st Floor – 777 Portage Avenue, Winnipeg Manitoba, R3G 0N3. Persons living outside of Province of Manitoba may check with their local Provincial authorities. This process may take up to four (4) to six (6) weeks, please feel free to submit proof of Child Abuse Registry Check receipt with this application pending official registry check.



Are you bondable: Yes No (Provide a statement of eligibility)

Miscellaneous:

Peguis First Nation have a drug free policy. Applicants must be drug free.

Do you agree to drug testing: Yes No

Is there currently a conflict of interest if you have selected as a Trustee: Yes No

If yes, then provide details:

It must be stated. Do you have full and complete mental capacity: Yes No

Do you lead a healthy non-abusive lifestyle: Yes No

Provide a one-page summary on why you are applying for the Trustee Position.

Declaration and Consent:

I confirm and declare that the above information is true, accurate and complete. I understand that, in the event, any of the above information is found to be materially untrue or inaccurate, that my application will not be considered by the Nominating Committee; or if the process has been completed, my appointment may be revoked or nomination for election will be withdrawn (whatever that case may be)

I understand that all information on this application is subject to verification, and I consent to criminal history and background checks. I also agree that you may contact references and educational institution listed on this application.

I hereby authorize and consent to the release of information and for the purposes of the Freedom of information and Protection of Privacy Act, I authorize and consent to the use by or the disclosure to Peguis First Nation of any personal information that is collected for the purposes of processing this application and explaining Committee/Council decisions to the Member of Peguis First Nation.

Date: _____, 20 _____

Applicant Signature: _____