Stirling Council Community Council Co-option Nomination Form

The undernoted candidate is hereby proposed and seconded for CO-OPTION to the following Community Council.

Name of Community Council		
Candidate's Details – PLEASE PRINT DETAILS		
Candidate's surname		
Other names in full		
Home address in full (including postcode)		
Telephone Number		
Email Address		
Candidate Signature		
Date		
I, the nominee for the above	co-option, consent to being a candidate.	

I understand that my details will be retained by Stirling Council and used by them to contact me on Community Council business.

Notes:

Candidates for co-option must be 16 years of age, reside in the local area and be named on the electoral register for the **community council area** in which they are standing. For precise details refer to the Scheme of Establishment of Community Councils.

A copy of the Scheme of Establishment are available to download from www.stirling.gov.uk/communitycouncils or contact the Community Engagement Team T. 01786 233948 E. <u>ccenquiries@stirling.gov.uk</u>

Community Council Office Bearer's Signature	
Date	

This Nomination Form should be duly completed and sent to the Community Council Enquiry Officer, Viewforth, St Ninians Road, Stirling FK8 2ET for checking *prior to co-option*.

Stirling Council (Election Office use only)	Date	Signature
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