

The Council of Islamic Guidance Inc.
510 Concession 3 Road, Pickering, Ontario, L1X 2R4, Canada
Tel.:(905) 837-1572 Website: www.cig.ca E-mail: ec@cig.ca

ELECTION 2019 Withdrawal / Retirement Form

Withdrawal/Retirement* Form from Election/Bye Election* to be held on _____

* Strike out whichever not applicable

* Strike out whichever not applicable

dd/mm/yyyy

The Election Commissioner,
The Council of Islamic Guidance Inc.

I, _____
First Name of Candidate Middle Initial of Candidate Last Name of Candidate

hereby withdraw my nomination from the election of the Council for the office of _____.

My particulars are as follows:

Date/Year of Membership with the Council: _____ Date of Birth: _____
dd/mm/yyyy dd/mm/yyyy

Address:

Signature of the Candidate: _____ Date: _____
dd/mm/yyyy

FOR OFFICIAL USE

ELECTION COMMISSIONER'S REMARKS

Withdrawal Accepted / Rejected

Retirement Accepted / Rejected

Signature of the Election Commissioner: _____

Date: _____
dd/mm/yyyy

