

## **CHIEF AND COUNCIL MEETING REQUEST FORM**

- These meetings provide an opportunity for debendaagziwaad to appear before Chief and Council to address a specific subject matter.
- Chief and Council meetings will be live streamed as per the Nipissing First
   Nation Chief and Council Live Stream Policy.

REQUIREMENTS (	CHECKLIST
☐ Are you submitting this form 7 days prior (Otherwise, you may be deferred	_
☐ If your topic is a complaint about a service you demonstrated that you have attempted respective department or senior management back to the respective department with administration administration.	d to resolve the matter through the ent? (Otherwise, you will be deferred the additional support from the
☐ <b>Have you completed the mandatory sect</b> imust be completed to be considered for included agenda.	usion on a Chief and Council meeting
$\square$ If approved for inclusion in the agenda acknowledge that you will be	
Section A (man	datory)
Name:	Date:
Address:	Band # (if applicable):

Home #: Email: Cell #:



Section B		
What does your topic involve? (Please check off all that apply)		
Nipissing First Nation – check off box(es)		
□ Program □ Service □ Policy		
☐ Federal, Provincial or other agency business (please name):		
☐Time sensitive issue (please explain):		
□Other:		
Section C:		
What is the proposed agenda topic?		
Please explain your topic in as much detail as possible below (use a separate page if necessary, and include supporting documents)		
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Section D (mandatory)	
What outcome are you seeking from a meeting with Chief and Counci	il?
Have you attempted to resolve the issue with the Department or individ	
Please demonstrate you have made sincere attempts to obtain a resoluti the issue with the respective department.	on to
Please provide a summary below and attach the request form, letters, en	
or other documents to support your matter. (If you need more space, pl	ease
use a separate page and attach it to your submitted form)	
Signature: Date Submitted:	

PLEASE DELIVER IN PERSON, MAIL OR EMAIL THIS <u>COMPLETED</u> FORM TO:

Kayla Lariviere
Executive Services Supervisor
36 Semo Road
Garden Village, ON P2B 3K2
kaylal@nfn.ca