

**UCHUCKLESAHT TRIBE**

**Integrity Review Act  
Form DHS-4**

**REVIEW REQUEST**



**Date received:**

*(for office use only)*

**A. APPLICANT**

Full Legal Name:	
Citizenship No. <i>(if applicable)</i> :	
Enrolment No. <i>(if applicable)</i> :	
Address:	
Telephone Number:	
Email Address <i>(optional)</i> :	

**B. DETAILS OF REQUEST**

I have reason to believe that the following Uchucklesaht government representative or Uchucklesaht director has engaged in conduct contrary to the Integrity Act and hereby request a review of that Uchucklesaht government representative or Uchucklesaht director's conduct by the Executive:

\_\_\_\_\_ *(name of person complaint is about)*

The basis for this review request is as follows:

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(please continue description on additional pages if required)

I am attaching the following documents in support of this review request:

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_
- 5. \_\_\_\_\_
- 6. \_\_\_\_\_
- 7. \_\_\_\_\_
- 8. \_\_\_\_\_
- 9. \_\_\_\_\_
- 10. \_\_\_\_\_

(please continue list on additional pages if required)

I certify that the information contained in this review request is true to the best of my knowledge and belief. I acknowledge that this review request is subject to the requirements of the Integrity Act and that acceptance for filing is not an indication that those requirements have been met.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR OFFICE USE ONLY**

APPLICATION FEE

- Application fee received Date: \_\_\_\_\_
- Application refunded Date: \_\_\_\_\_

DECISION ON REVIEW REQUEST

- Contravention found
- No contravention found

Date of Executive resolution: \_\_\_\_\_

Written reasons provided/attached: Yes or No (circle one)

Signature of Chief Councillor: \_\_\_\_\_

Date: \_\_\_\_\_