|  |  |
| --- | --- |
|  | Notification of a director ID |
|  |  |

|  |  |
| --- | --- |
| Name of corporation |       |
|  |
| Indigenous Corporation Number (ICN) |       |
|  |

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| --- |
|  |
| Director information |

*You can use this form to notify ORIC of a director ID for one director or multiple directors. You can add more rows if required.*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Title | First name | Middle name | Last name | Director ID |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
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|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |

*Add more rows if required*

|  |
| --- |
|  |

|  |  |
| --- | --- |
| Declaration | *I declare the information provided on this form is correct.* |
| Full name | Date |
|       |  |       |