



Hello Town Clerk's Staff,

Please note the following response to Delegate Request Application has been submitted at Monday October 2nd 2023 7:05 AM with reference number 2023-10-02-002.

<https://forms.milton.ca/Management/Response/View/13cfde8c-5a2e-4a23-8de3-b08f8320111d>

### Application Information

- **First Name:**  
Zahraa
- **Last Name**  
Syeda
- **Email Address:**  
[REDACTED]
- **Phone number:**  
[REDACTED]
- **Are you representing a group?**  
Yes
- **Group Name**  
Sakeenah Canada
- **Town**  
Milton
- **Please indicate how you intend to participate during the Council Meeting**  
In person
- **Please describe the issue you intend to present:**  
Sakeenah Canada's services and work as well as the heightening need for these services in society.



- **Please describe specific actions you want Council to take:**  
Use Sakeenah Canada as a resource to support those in need.
- **Please provide your comments in support of or in opposition to the staff recommendation:**

**Do you give your permission to be audio and video recorded on the Town of Milton's live Council meeting stream?**

Yes I give my permission



Hello Town Clerk's Staff,

Please note the following response to Delegate Request Application has been submitted at Tuesday October 3rd 2023 1:48 PM with reference number 2023-10-03-065.

<https://forms.milton.ca/Management/Response/View/9a59907a-4785-4f9d-b1a1-b090fd2fa5db>

### Application Information

- **First Name:**  
Mahnoor
- **Last Name**  
Bano
- **Email Address:**  
[REDACTED]
- **Phone number:**  
[REDACTED]
- **Street Address:**  
[REDACTED]
- **Town**  
Mississauga
- **Postal Code:**  
[REDACTED]
- **Are you representing a group?**  
Yes
- **Group Name**  
Hum-We



- **Street Address:**  
810 Nipissing Road
- **Town**  
Milton
- **Postal Code:**  
L9T 4Z9
- **Council Meeting Date**  
10/23/2023
- **Please indicate how you intend to participate during the Council Meeting**  
In person
- **Please describe the issue you intend to present:**  
To highlight the work done by Hum-We as an organization and to bring forth issues related to domestic violence and abuse.
- **Please describe specific actions you want Council to take:**  
N/A
- **Please provide your comments in support of or in opposition to the staff recommendation:**  
N/A

**Do you give your permission to be audio and video recorded on the Town of Milton's live Council meeting stream?**

Yes I give my permission



Hello Town Clerk's Staff,

Please note the following response to Delegate Request Application has been submitted at Monday October 9th 2023 12:00 PM with reference number 2023-10-09-010.

<https://forms.milton.ca/Management/Response/View/02cf5f57-6575-4f6a-a575-b0965bab03e8>

### Application Information

- **First Name:**  
Abarna
- **Last Name**  
Nathan
- **Email Address:**  
[REDACTED]
- **Phone number:**  
[REDACTED]
- **Street Address:**  
[REDACTED]
- **Town**  
North York
- **Postal Code:**  
[REDACTED]
- **Are you representing a group?**  
Yes
- **Group Name**  
SAFE (Survivor Advocates for Empowerment)



- **Street Address:**  
726 Parker Crescent
- **Town**  
Burlington
- **Postal Code:**  
L7R 3A3
- **Council Meeting Date**  
10/23/2023
- **Please indicate how you intend to participate during the Council Meeting**  
In person
- **Please describe the issue you intend to present:**  
We are looking to speak on Councillor Ali's motion to declare intimate partner violence an epidemic. We will be speaking on our organization's activities and mission, and one of our members will share a personal story.
- **Please describe specific actions you want Council to take:**  
Declare intimate partner violence an epidemic.
- **Please provide your comments in support of or in opposition to the staff recommendation:**  
We advocate in Ontario to end gender based violence and are in full support if declaring it as an epidemic in communities across Ontario.
- **Do you give your permission to be audio and video recorded on the Town of Milton's live Council meeting stream?**  
Yes I give my permission