

School Council Parent Self-Nomination Form



I wish to declare my candidacy for an elected position as a parent/guardian representative on the School Council.

Name: _____

Address: _____

Phone Number to be reached at: _____

E-mail: _____

I am the parent/guardian of _____ (name of student),
who is currently registered at this school.

I am an employee of the board.

Yes

No

Candidate's signature

Date

Please include a brief autobiography on the back. Your attendance at the first meeting is necessary to confirm your interest and to find out about further responsibilities as a member. If there is a need to hold an election it will be determined at the first meeting. Return the form to the office no later than Tuesday, September 24, 2019

FIRST MEETING IS THURSDAY, SEPTEMBER 26, 2019