

## SCHOOL COUNCIL CANDIDATE NOMINATION FORM

Please chec	ck the appropriate bo	x below:	
	I wish to declare my candidacy for an elected position as a parent/guardian representative on the school council.		
		ive on the school council.	for an elected position
Name:			
Address: _			
Home Phon	Home Phone: Business Phone:		
E-mail:	E-mail:		
I am the pa at this scho		(name of student)	, who is currently registered
		is the parent/guardian of _	,
(na	me of person nominated)		(name of student)
who is curr	ently registered at th	is school.	
Candidate's /	Nominator's signature		Date
	le a brief autobiography d to this form.	/biography of the person nomina	ted on the back of or on a separate
You will be n	otified when your nomir	nation has been received.	
TOU WIII OC II	onned when your nomin	iditori itas occii received.	