



NOMINATION FORM - PARENT/GUARDIAN CANDIDATE

Name:		
Address:	Home Phone	Work Phone
Email address:		
I am the parent/guardian of _____ (Name(s) – please print) presently enrolled at this school. I wish to declare my candidacy for the elected position of representative for parents and guardians on the School Council. I understand the role and responsibilities of members of the School Council, which are described in the attached flyer.		
Candidate's Signature:		Date:
For School Use		
Received by:	Time:	Date:

School: _____

Principal: _____