

**SCHOOL COUNCIL NOMINATION FORM**

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**I. THE UNDERSIGNED, DO HEREBY NOMINATE:**

Name: \_\_\_\_\_ *(print in full)*

Residential Address:

\_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_

e-mail or fax: \_\_\_\_\_

**FOR THE POSITION OF \_\_\_\_\_ REPRESENTATIVE.**  
(parent, teacher, or non-teaching)

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**NOMINATOR**

Name: \_\_\_\_\_ *(please print)*

Residential Address:

\_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_

e-mail or fax: \_\_\_\_\_

Signature of Nominator: \_\_\_\_\_

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**CANDIDATE TO COMPLETE**

I ACCEPT THE NOMINATION AND I AM PREPARED TO SERVE AS A MEMBER  
OF THE \_\_\_\_\_ SCHOOL COUNCIL.

Signature of Nominee: \_\_\_\_\_

Date: \_\_\_\_\_

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