

SCHOOL COUNCIL NOMINATION FORM

I, THE UNDERSIGNED, DO HEREBY NOMINATE:

Name: _____ (print in full)

Residential Address:

Telephone: _____

e-mail or fax: _____

FOR THE POSITION OF _____ REPRESENTATIVE.
(parent, teacher, student, or non-teaching)

NOMINATOR

Name: _____ (please print)

Residential Address:

Telephone: _____

e-mail or fax: _____

Signature of Nominator: _____

CANDIDATE TO COMPLETE

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

Signature of Nominee: _____

Date: _____
