



## 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: \_\_\_\_\_  
\_\_\_\_\_

Home phone: \_\_\_\_\_ Business phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

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

I am an employee of the board.

Yes       No

\_\_\_\_\_  
Candidate's Signature

\_\_\_\_\_  
Date

**Please include a brief autobiography, if desired.**

**(Return this form to Principal B. Woof at [bwoof@hwdsb.on.ca](mailto:bwoof@hwdsb.on.ca), or send a print copy in a sealed copy envelope to the school office.)**

