## **Balaclava School Council Nomination Form**

## **Self-Nomination**

I would like to join the School Council as an elected member. I understand that an elected position requires more involvement and responsibilities than a general member does. I understand that this role involves attending School Council meetings.

My Name:
My Phone:
My Email:
I am interested in serving in one of the following School Council roles (please circle): CHAIR CO-CHAIR TREASURER SECRETARY MEMBER-AT-LARGE OTHER
I am the parent/guardian of (student name) who is currently registered in Grade at Balaclava. I am an employee of HWDSB (circle one): YES NO
Nomination of Another Candidate
Nominator's Name:
Nominee's Name:
Nominee's Phone:
Nominee's Email:
Suggested School Council roles for the nominee (please circle):
CHAIR CO-CHAIR TREASURER SECRETARY MEMBER-AT-LARGE OTHER
The nominee is the parent/guardian of(student name) who is currently registered in Grade at Balaclava
Is the nominee an employee of HWDSB? (please circle): YES NO

Please complete and return this form to the school office by September 19, 2024