

**SCHOOL COUNCIL PARENT CANDIDATE NOMINATION FORM**

- ☐ I wish to nominate \_\_\_\_\_ for an elected position as a parent/guardian representative on the school council.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

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

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

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

\_\_\_\_\_ is the parent/guardian of \_\_\_\_\_,  
(name of person nominated) (name of student)

who is currently registered at this school.

The person I have nominated is an employee of the board.

☐ yes ☐ no

\_\_\_\_\_  
Nominator's signature

\_\_\_\_\_  
Date

***Please include a brief biography of the candidate you have nominated on the back of or on a separate sheet attached to this form.***

You will be notified when your nomination has been received.