HELEN DETWILER SCHOOL SCHOOL COUNCIL NOMINATION FORM - 2020-2021

SELF-NOMINATION

I would like to join 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 E-mail:						
I am interested	in serving in o	ne of the follow	ring School Cour	ncil roles (pleas	se circle):	
CHAIR	CO-CHAIR	TREASURER	SECRETARY	MEMBER AT	LARGE	OTHER
		at Helen De	etwiler School	[stud	ent name] who is
I am an employ			YES	NO		
NOMINATION (OF ANOTHER C	ANDIDATE				
Nominator's Na	ıme:					
Nominee's Nam	ne:					
Nominee's Pho	ne:					
Nominee's Ema	il:					
Suggested Scho	ol Council role	s for the nomin	ee (please circle):		
CHAIR	CO-CHAIR	TREASURER	SECRETARY	MEMBER AT	LARGE	OTHER
The nominee is is currently regis	the parent/gu stered in Grade	ardian of e at Helen	Detwiler School.			, who
Is the nominee an employee of HWDSB? (please circle): Y				YES	NO	

Please complete and return this form to the school email address helendetwiler@hwdsb.on.ca by Wednesday, Oct. 21st at 12:00 pm