



# Sir William Osler Elementary School

PROUD SCHOOL OF HAMILTON-WENTWORTH DISTRICT SCHOOL BOARD

330 Governor's Road  
Dundas, Ontario L9H 0A3  
Phone: 905.628.1588  
Fax: 905.628.2275

EMAIL: [sirwilliamosler@hwdsb.on.ca](mailto:sirwilliamosler@hwdsb.on.ca)  
WEBSITE: [www.hwdsb.on.ca/sirwilliamosler](http://www.hwdsb.on.ca/sirwilliamosler)  
Principal: T. Walsh  
Vice-Principal: U. Qureshi

The focus of School Council is to improve student learning, achievement and well-being and enhance the accountability of the education system to parents. **School Councils are advisory committees - they provide advice to the Principal/Vice Principal and school board.** Every school must have a School Council (members include parents/caregivers, the Principal/Vice Principal, school staff, and a community representative).

## SCHOOL COUNCIL PARENT DECLARATION OF INTEREST 2022-23 FORM

- I wish to nominate myself as a parent/guardian representative on the Sir William Osler School Council.
  - I understand that an **elected position** requires more involvement and responsibilities than a general member does (including attending School Council meetings).

I am interested in serving in one of the following School Council roles for the 2022-23 school year (check below):

- School Council CHAIR
  - School Council CO-CHAIR
  - School Council SECRETARY
  - School Council TREASURER
  - School Council Community MEMBER AT LARGE
- I am interested in becoming a voting member of SWO School Council (25 max.)

I am the parent/guardian of \_\_\_\_\_ who is/are currently registered in grade(s) \_\_\_\_\_ at Sir William Osler School.

I am an employee of the Hamilton-Wentworth District School Board:  Yes  No

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

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

By signing below, I agree to conduct myself in accordance with norms and expectations outlined. I recognize that my candidacy will be void if I miss two meetings in the school year. I further recognize that there is a maximum of 25 parents permitted to comprise the Council of this school and by submitting this form it does not guarantee my candidacy. I permit my above personal information to be included on any school council membership information that will be circulated within council.

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

\_\_\_\_\_  
Date

Please return this form via email to [sirwilliamosler@hwdsb.on.ca](mailto:sirwilliamosler@hwdsb.on.ca) if you are interested in serving on Osler's School Council as a voting member (If you are not able to scan and email please send in sealed envelope to the attention of Mrs. Walsh). Please note elections, if necessary, will be held at our **initial meeting on October 6<sup>th</sup> at 5:00 p.m.** Only those in attendance (in person or on MS Teams) at our first meeting will be eligible for voting member positions.

**\*Please complete and return this form to the school office by OCTOBER 5<sup>th</sup> @ 12pm.**

curiosity.

creativity.

possibility.

**HWDSB**



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