



Viola Desmond Elementary School

PROUD SCHOOL OF HAMILTON-WENTWORTH DISTRICT SCHOOL BOARD

50 Secord Dr.
Hamilton, Ontario L8K3W7
Phone: 905.296.2549
Fax: 905.661.8715

EMAIL: violadesmond@hwdsb.on.ca
PRINCIPAL: Mrs. T. Morabito
VICE-PRINCIPAL: Ms. J. Welsh
www.hwdsb.on.ca/violadesmond

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September 21st, 2022

What is "School Council"?

School councils provide advice to the principal and school board. Every school should have a school council, and members include parents, the principal, a teacher, a student (optional), a non-teaching staff member and a community representative. The majority of members must be parents, and the chair must be a parent.

Principals do not vote on school council decisions.

SCHOOL COUNCIL VOTING MEMBER NOMINATION 2022-2023

Council meetings are open to everyone in the community, so you do not have to be a voting member to attend or speak at any of our meetings. There should be at least 4 meetings held in a year. Meeting schedule will be determined at the first council meeting.

If virtual meetings are chosen, they will remain accessible to the public, taking into consideration open online participation, to ensure school council guidelines are maintained.

If you are interested in being a voting member of the School Council for Viola Desmond, please fill out the attached nomination form. You may also self-nominate.

School Council membership has been set at a maximum of 25 members with a 6-member minimum, and 4-member voting privilege. Parent members must constitute a majority of the members of the School Council. Voting members must be a custodial parent/caregiver of a student attending Viola Desmond and must commit to attending monthly meetings regularly for the entire school year. HWDSB employees must disclose this in their profile.

If you wish to be a voting member we ask that this be returned to the office by Wednesday, September 28th, 2022.

Yours sincerely,

Mrs. T. Morabito, Principal & Ms. J. Welsh, Vice-Principal



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SCHOOL COUNCIL NOMINATION FORM

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 (a minimum of 4 per school year.).

My Name: _____

My Phone: _____

My E-mail: _____

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 Viola Desmond Elementary School.

I am an employee of HWDSB (please circle): 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 _____, who is currently registered in Grade ____ at Viola Desmond Elementary School.

Is the nominee an employee of HWDSB? (please circle): YES NO

If you wish to be a voting member on the 2022-2023 School Council please complete and return to the school office by Wednesday, September 28th, 2022. By signing below, I acknowledge that I agree to conduct myself in accordance with the expectations outlined for a member of school council. I recognize that a minimum of 6 parents are permitted to comprise the Council of this school and that by submitting this form it does not guarantee my candidacy.