## **Viola Desmond 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 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. |
| 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.   |
| Is the nominee an employee of HWDSB? (please circle): YES NO                                     |

Please complete and return this form to the school office by September 23<sup>rd</sup> 2024