## **CANDIDATE NOMINATION FORM (ELECTIONS)**

		School Name		
		on the school council.	elected position as a par	
	Address: _			
		(Street)	(City/Town)	(Postal Code)
			Cell Phone	e:
	E-mail:			
	I am the parent/guardian of, who is currently register			o is currently registered
	(Student's Name) at			
	(School Name)			
	I am an employee of the Board Yes No			
	Lam interested in an officer position			
	i am interected			
		in an officer position		
	Chair	in an officer position  Secretary	Treasurer	
			Treasurer	
	Chair	Secretary	Treasurer	(Data)
	Chair (Cand	Secretary  didate's Signature)		(Date)
	Chair (Cand	Secretary  didate's Signature)	Treasurer	, ,
	Chair (Cand	Secretary  didate's Signature)		, ,
	Chair (Cand	Secretary  didate's Signature)  Form Receipt		
	Chair (Cand	Secretary  didate's Signature)  Form Receipt		
	Chair (Cand	Secretary  didate's Signature)  Form Receipt		
	Chair (Cand	Secretary  didate's Signature)  Form Receipt		
	Chair (Cand	Secretary  didate's Signature)  Form Receipt  or a parent representat		·
	Chair (Cand	Secretary  didate's Signature)  Form Receipt  or a parent representat		n received for: