

LAKEVIEW SCHOOL COUNCIL PARENT SELF-NOMINATION FORM

I wish to declare my candidacy for an elected position as a parent/guardian representative on the school council

NAME: _____

ADDRESS: _____

HOME PHONE: _____

OTHER PHONE: _____

EMAIL: _____

(note: majority of communication will be sent via email, so please provide an email address you check regularly)

I am the parent/guardian of _____, who is currently
(name of student)
registered at this school.

I am an employee of the Ottawa Carleton District School Board

- YES
- NO

Candidate's signature

Date

Nomination received by:

Date: