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SCHOOL GOVERNANCE COUNCIL

Nomination Form

- Self-Nomination (complete section A and B)
 Nomination of Other (complete section A and C)

Section A

Candidate's name _____

Phone Number _____

Email _____

To represent (Please check one):

- Parents Child's name and grade _____
 Teachers
 Business/Community

Expectations of members:

- Attend up to 12 meetings during the school year
- Work to improve the opportunities for all students in my school
- Learn about the needs of my school community
- Participate in training sessions

Please provide a brief description of why you/nominee should be selected to serve on the School Governance Council.

Section B

Candidate's Signature _____

Section C

I have confirmed that the nominee is willing to run for membership on the School Governance Team:

Nominator's name _____

Nominator's signature _____

Please return this to the school office by _____.