



## EARL HAIG SCHOOL COUNCIL PARENT SELF-NOMINATION FORM

(to be completed and returned to school office by 4:00 p.m. on Friday, September 18)

- **I wish to declare my candidacy for an elected position as a parent/guardian representative on the school council. Position: \_\_\_\_\_**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_

**Home phone:** \_\_\_\_\_ **Mobile phone:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**I am the parent/guardian of** \_\_\_\_\_, **who is currently registered**  
*(name of student)*  
**at this school in grade/ homeroom** \_\_\_\_\_.

**I am an employee of the TDSB.** Yes No

**Candidate's signature** \_\_\_\_\_

**Date** \_\_\_\_\_

Please provide a brief description of the skills/experiences you bring to this position. (optional):