



**EARL HAIG 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. 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):