

_____ School

20__ - 20__ SCHOOL SITE COUNCIL PARENT CANDIDATE NOMINATION FORM

I wish to nominate _____ for an elected position as a parent/community member School Site Council.

Name of person making nomination: _____

Address: _____

Phone (home/business) _____ email _____

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

Nominee Information (complete 1 or 2):

1) _____ is the parent/guardian of _____ who is currently enrolled at this school.
(name of person nominated) (name of student)

2) _____ is a community member in the school's attendance area representing _____.
(name of person nominated) (community business or non-profit organization)

Contact information for nominee:

Address: _____

Phone (home/business) _____ email _____

Please check:

The person I have nominated is NOT an employee at this school.
The person I have nominated IS an employee at this school

Nominator's signature

Date

Please include a brief biography of the candidate you have nominated on the back or on a separate sheet attached to this form.

Thank you for your nomination for school site council.
You will be notified when your nomination has been received.

[Type here]