

ELECTIONS

**Halton Catholic School Council
Nomination Form**

School: _____

Candidate's Name: _____

Address: _____

Home Phone: _____ **Business Phone:** _____

- In accordance with the Halton Catholic District School Board Policy on School Council, I declare that I, _____ am eligible to be come an elected member.

Signature: _____

All Positions

- If elected, I fully understand and agree to support my roles and responsibilities as a member of this School's Council, as outlined in the Halton Catholic District School Board Policy on School Councils and in the Halton Catholic District School Board Operations Manual on School Councils.

Signature: _____

This form must be completed in full and submitted to the Principal of the School by 4:00 p.m.

ON:

DUE DATE: Thursday, September 16, 2010

RECEIVED BY: _____ **DATE:** _____ **TIME:** _____