

**Catholic School Council Elections**

**NOMINATION FORM FOR ELECTION OF PARENT MEMBERS**

**St. Jerome Elementary Catholic School**

Please complete the following and return to our school office by **4:00 pm on Wednesday, September 20, 2017.**

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_ Child's Name \_\_\_\_\_

1) I am a Catholic School elector or spouse Yes  No   
(Note: To be eligible, a candidate must be a separate school elector or spouse.)

2) I am an employee\*\* of the Dufferin-Peel Catholic District School Board and I work at this school Yes  No

3) I am an employee\*\* of the Dufferin-Peel Catholic District School Board but I work elsewhere in the Board (i.e. not at this school). Yes  No

**\*\*Note: "Employee" includes parents/guardians who work as Lunchroom Supervisors and/or Emergency Supply Instructors.**

This is self-nomination (name): \_\_\_\_\_  
It is not necessary to receive a nomination from another parent.

This is a nomination made by another parent:  
I nominate \_\_\_\_\_ to be a parent representative on our Catholic School Council.

Signature of Nominee \_\_\_\_\_ Name (print) \_\_\_\_\_

Signature of Nominator \_\_\_\_\_ Name (print) \_\_\_\_\_

Signature of School Official \_\_\_\_\_ Date \_\_\_\_\_

**Please attach a brief biography (one or two paragraphs).**