Nomination for School Advisory Council.

**Nomination Form**

An election is to be conducted for members of the School Advisory Council of Our Lady’s Primary School.

|  |  |
| --- | --- |
| Name of Nominee ( in full) |  |
| Address |  |
| Email |  |
| Contact Telephone Number |  |
| Parent/ Guardian of: |  |
| 2022 Year Level of Child/ Children |  |

Candidates Statement

Please supply short paragraph outlining the experience/interest you will bring to the Board.

If a vote is required, this will be used in the information to assist in election.

Signature of Candidate\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nomination endorsed by\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_