

Catholic School Parent Council
Parent Candidate Nomination Form
NEIL McNEIL HIGH SCHOOL

I wish to nominate _____ for an elected position as a
Parent/guardian representative on the school council.

Name: _____

Address: _____

Home phone: _____ Business phone: _____

E-mail Address: _____

I am the parent/guardian of _____ who is currently registered at
this school.

Name of Student

_____ is the parent/guardian of _____
(Name of person nominated) (Name of student)

The person I have nominated is an employee of the Toronto Catholic District School Board. Yes No

Nominator's signature _____ Date: _____

Please include a brief biography of the candidate you have nominated on the back of this form, or attached one on a separate sheet of paper. Please submit the completed form to the Main Office.

You will be notified when your nomination has been received.