Candidate Information!

SCHOOL GOVERNANCE COUNCIL

SUBMIT WITH THE NOMINATION FORM NO LATER THAN OCTOBER 13TH- 3:00 PM

Participating on the School Governance Council can be a rewarding experience for all those who value the opportunity to make a difference in public education.

School name: ______

Candidate's name: _____

Role Group:

- □ Parents
- □ Teachers

□ Students (High Schools ONLY)

Commitment: (Specific to brand new councils)

- □ One Year
- □ Full Term (2 years)

Please provide a brief description of yourself and state why you would like to serve on the School Governance Council.

Candidate's signature: Date: