

HARBORD COLLEGIATE INSTITUTE SCHOOL COUNCIL PARENT ELECTION NOMINATION FORM

Please complete and return to Harbord CI by noon September 25, 2023 or email to steve.yee@tdsb.on.ca

I wish to nominate	I wish to nominate		for the School Council.	
I wish to self-nominate for t	the School Council.			
ame				
ddress				
none:		E-mail:		
I am the parent of the following s	tudent(s) at			
Student:	in Grade:	Class:		
Student:	in Grade:	Class:		
I am an employee of the Toronto	District School Board:	Yes (or)	No	
ominee Name		Cimord	Signature	
lominator Name (Please Print)		Signat	ure	
Please include a brief description of y	your skills/interest. You w	vill be notified v	vhen your nomination has be	