

**Nomination of a Candidate for Parent Representative on the School Advisory Council**

**I wish to nominate myself as a candidate for the School Advisory Council (SAC) for the term of 2 years.**

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| **Full Name** |  |
| **Contact Number** | **(H)**  **(M)** |
| **Children are the School** | |
| **Class** | **Name** |
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**Please provide a brief outline about yourself and why you would like to be a Parent Representative on the School Advisory Council.**

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**Declaration of Candidate:**

**I nominate myself as a candidate, and will accept the responsibility of being a parent representative.**

**Signature of Candidate:**

**Date:**