Form 5: self-nomination form for school employee member category

I wish to declare my candidacy for an elected position as a school employee mem (school name below)	nber on the	
East Doncaster Secondary College		
school council		
Candidate's details		
Name		
Residential Address:		
Contact whome (makile or lengthing):		
Contact phone (mobile or landline):		
Email:		
Statement	Yes (Mark with an x)	No (Mark with an x)
I am an employee of the Department of Education and Training	unxy	un xy
I am an employee of the school council		
I am engaged in work at and for the school.		
I accept the nomination and I am prepared to serve as a school employee member named school council. I hereby declare that:	per of the al	oove-
I am not and have not been insolvent under administration within the last three y	rears	
I have not been found guilty of an offence that is, or would if committed in Victori indictable offence	ia be, an	
I am not a registrable offender within the meaning of the Sex Offenders Registra	ation Act 20	04.
I am not suffering from any medical condition that would affect my ability to performember of a school council.	orm the role	of
Signature of Candidate		
Date:		

You will be notified when your nomination has been received.

The personal information provided in this form is collected as part of the school council election nomination process. The information may be used to determine your eligibility as a candidate. Your personal information may be disclosed as a result of inspection prior to the commencement of voting or at any time up to one year from the declaration of the poll.