

SEACLIFF PRIMARY SCHOOL

Barwell Avenue, Seacliff SA 5049 P 08 8296 1950 F 08 8296 5729 E dl.0913.info@schools.sa.edu.au www.seacliff.sa.edu.au

Parent Member Nomination
I(full name)
of(address)
wish to declare my candidacy to be elected as a member of Seacliff Primary School Governing Council.
I hereby declare that:
• I am the parent of a child attending the school or enrolled, but not yet attending at the school.
 I am / am not employed by the Department of Education and Children's Services under the PSM Act or Education Act.
 I have not been declared bankrupt and do not receive a benefit of a law for the relief of insolvent debtors.
 I have not been convicted of any offence of dishonesty, or of a sexual nature involving a minor, or of violence against a person.
 I understand that should I be declared bankrupt, receive a benefit of law for the relief of insolvent debtors or be convicted of any offence of dishonesty, or of a sexual nature involving a minor, or of violence against a person, I will be required to relinquish my membership of Seacliff Primary School Governing Council as I will no longer meet the membership requirements.
Signed



Parent Member Nomination – Profile

In support of your application to be elected as a member of Seacliff Primary School Governing Council, nominees are required to provide a profile in support of their application. In the event of a ballot this information will be provided to the school community for the purposes of voting for preferred nominees. Please limit your response to no more than 250 words.

About You (please provide some background information about yourself and your connection to the school)	
Your Contribution (please provide a statement about your motivation for joining Governing Council and what you hope to achieve if you are elected to Governing Council)	
Experience, Expertise or Special Interest (please highlight any specific experience, expertise or special interests you consider will enhance your contribution to Governing Council).	