## Nomination Form - Aspley State School Council Flected Parent Member for 2019

Elected Parent Member for 2019		
Name:		
Postcode:		
Phone: Mobile:		
Email:		
Elected Position	Eligibility	Nomination (please X)
Staff	All persons on staff at the school, with the exception of the Principal	
Parent	All parents of current children at the school, with the exception of the P&C President	
I agree to be bound by the constitution of the School Council. I agree to work within the boundaries of the <i>Education (General Provisions) Act 2006</i> . I agree to be bound by the Code of Conduct for School Councils. I hereby state that I have not been convicted of an indictable offence.		
Signature: Date:		
Please return this nomination form to the Returning Officer, Donna Boaler by 4.30pm Tuesday 28 May 2019.		
<ul> <li>This can be completed by:</li> <li>Delivering to the school front desk during school hours</li> <li>Email to <a href="mailto:dboal2@eq.edu.au">dboal2@eq.edu.au</a></li> <li>Fax to 3863 9100</li> <li>Mail to Returning Officer c/- ASPLEY STATE SCHOOL, Corner Horn Rd &amp; Maundrell Terrace, Aspley Qld, 4034</li> </ul>		
	f the person has been convicte oval, in accordance with the E	ed of an indictable offence, ducation (General Provision)
If you have any queries regarding the School Council election process, please contact the Principal, Mrs Leann Griffith-Baker or myself.		
Regards,		
Donna Boaler Returning Officer.		
Returning Officer Use		
Date Received://	Processed:	//