



NOTICE OF APPLICATION

CONTACT INFORMATION

| | |
|----------------|--|
| Name: | |
| Address: | |
| | |
| | |
| Home Phone No: | |
| Business No: | |
| Cellular No: | |
| Email address: | |

Consent to Release Information

The attached Notice of Application Form will be posted on the Greater Essex County District School Board website. However, we will not release contact information for candidates without authorization. Please check ~~below~~ if you consent to release ~~the~~ the following information to the public:

- Name
- Address

I, _____, hereby consent to the release of the contact information noted above.

Candidate Signature



NOTICE OF APPLICATION FORM

Office of Public School Trustee

APPLICANT INTEREST

Please explain why you feel you should be the successful candidate for the position of Trustee, Wards 1, 2 and 3 (maximum 1000 words). Outline your commitment to public education as reflected in your involvement in Greater Essex County District School Board public schools or its committees, including your background, qualifications, interests, experience, and experience that support your candidacy.

