



Where the future is present

**Hartford Magnet Trinity College Academy  
School Governance Council Election  
Candidate Nomination Form**

**Important Note:** This form must be submitted to the office of the principal , Sally Biggs  
(Please print all information)

School Name: Hartford Magnet Trinity College Academy

Candidate Type:

<input type="checkbox"/> Parent/Legal Guardian	<input type="checkbox"/> Community Resident
<input type="checkbox"/> Teacher	<input type="checkbox"/> Student

Candidate Name: \_\_\_\_\_  
First Name
Middle Initial
Last Name

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Email: \_\_\_\_\_

**This section is to be completed by candidates for the position of Parent Representative:**

How many of your children attend this school? \_\_\_\_\_

Names of your children: \_\_\_\_\_ Grades: \_\_\_\_\_

**CONFLICT OF INTEREST**

Are you related to the principal? \_\_\_ Yes \_\_\_ No If YES, you CANNOT serve on this SGC.

Do you, your spouse or relatives, or your company do any business with the Board of Education, or the school where you are running? \_\_\_ Yes \_\_\_ No

If YES, explain: \_\_\_\_\_

**I verify that the information contained in this Candidate Nomination Form is true and accurate to the best of my knowledge and belief.**

Candidate's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Received by: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

**Nomination Forms are due by Wednesday, Aug. 26, 2015**