 **2014-2015** **NOMINATION FORM**

**Candidates must meet the minimum criteria for nomination:**

* Must have at least one PYP, MYP or DP level student enrolled at Wellspring for at least 2 years, or one Preschool students enrolled for at least 1 year.
* Must reside in Lebanon full time.
* May not be a directly related to a Wellspring Staff member (includes spouse, brother, sister, parent, child).
* Able to serve for a term of 2 years if elected.
* Must read and sign ***Candidate’s Pledge*** on reverse side of this form.

**Please check the committee position you are running for:**

* **2-year Term – Voting Member New Candidate Re-election**

Open to all parents meeting the above criteria.

* **1-year Term – Voting Member New Candidate Re-election**

Open to the parents of international students with short-term assignments in Lebanon.

|  |  |
| --- | --- |
| **Full Name:** | **Address:** |
| **Age:**  **(required by the Ministry)** |
| **Home Phone:**  **Mobile Phone:** | **E-mail Address:** |
| **Please list all children currently enrolled at Wellspring:**  **Name: Grade Level:**  **Name: Grade Level:**  **Name: Grade Level:**  **Name: Grade Level:** | |

I currently reside full time in Lebanon. **Yes** **No** - If no, please specify where\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**For Administration Use Only**

**Date Received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time received: \_\_\_\_\_\_\_\_\_\_\_\_** *stamp here*

**Received by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

** CANDIDATE’S PLEDGE**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ understand that by submitting my name to be a candidate to run for a seat on the WPAC (Wellspring Parent Advisory Committee) committee, I pledge to agree to follow the pledges below.

I pledge to:

* Support the school mission and be a leader in support of the school community.
* Support the values of the curriculum and Learner Profile.
* Attend and participate in all scheduled WPAC meetings and WPAC supported events.
* Act in the best interests of the entire community and not just my own, my child’s or the grade level that I may be elected to represent.
* Give the needs of students my primary consideration in all decision making.
* Be respectful of fellow committee members and seek to understand and accept the cultural differences that may exist between fellow members.
* Address any concerns or issues directly with the appropriate staff members rather than discussing the issues with other members of the committee.
* Work together in partnership with all fellow committee members and deal with disagreements with politeness, respect and through the appropriate channels should differences arise.
* Follow all school policies, systems and procedures and encourage other parents to do the same.
* Refrain from knowingly acting in such a way to harm the reputation of the school or any member of the community either within the community or publicly.
* Refrain from engaging in negative talk with other community members regarding the school’s programs, individual staff members and/or students and student families.
* Keep my tuition account in good standing.
* Keep parents in the grade level that I may represent informed and consult with them regarding WPAC business, and to clearly understand their needs and concerns.

By signing below, I attest that I have read, understand and agree to abide by the above Candidate’s Pledge. I further understand that should I be elected to serve on the WPAC committee, I may be removed from my elected seat, by vote of the WPAC committee, if I intentionally break or disregard any of the pledges as stated above.

**Candidate’s Signature**

Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_



**Candidate’s Personal Statement *(Required)***

Please tell the Wellspring Learning Community parents something about yourself and why you would like to serve on the Wellspring Parent Advisory Committee (WPAC). **Limit 150 words.**

You may attach a separate sheet and/or submit your statement by e-mail.

**Candidate’s Signature** *– I attest that this is my personal statement as submitted above.*

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Print Name

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Signature Date