



TORONTO CATHOLIC DISTRICT SCHOOL BOARD

DELEGATION REGISTRATION FORM FOR STANDING OR OTHER COMMITTEES

For Board Use Only

Delegation No.

- ☐ Public Session
☐ Private Session
☐ Five (5) Minutes

PLEASE BE ADVISED THAT ALL STANDING COMMITTEE MEETINGS ARE BEING RECORDED

Name: CAROLINE CHARLESMAGNE-ZINFONG

☐ Copy Provided

Standing or Other Committee:

- | | | |
|---|--|--|
| <input type="checkbox"/> Corporate Affairs, Strategic Planning and Property | <input type="checkbox"/> SEAC | <input type="checkbox"/> Student Achievement & Well-Being, Catholic Education, Human Resources |
| <input type="checkbox"/> Governance Framework | <input type="checkbox"/> Special Board | <input type="checkbox"/> Other |

Date of Presentation: JUNE 27, 2016

Topic or Issue: 2016-2017 SCHOOL YEAR BUS CANCELLATION AND THE BLANKET STATEMENT THE CHILD CARE PROVIDERS SHOULD PROVIDE THIS SERVICE AS A REQUIRE AS SERVICE ALREADY PROVIDED TO THE FAMILIES

Details: HAS THE BOARD ASKED CHILD CARE PROVIDERS WHAT THE IMPACT BUS CANCELLATION CAN BE ON THE BUDGET.

Action Requested: CONSIDERATION OF NUMBER OF CHILDREN BEING BUSSED FROM MY LOCATION.

Check One Box

- ☐ I am here as a delegation to speak only on my own behalf.
- ☐ I am an official representative of the Catholic School Parent Committee (CSPC).

School _____ Position _____

- ☐ I am an official representative of student government.

School _____ Position _____

- ☒ I am here as a spokesperson for another group or organization.

Name of group SQUIRRELS' NEST CHILD CARE CENTRE

Date: JUNE 27, 2016

Address: 1305 GUESNARD ROAD

Postal Code: M1R 2A2

Signature: 

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e-mail: SquirrelsNest@capecs.com