

APPENDIX B



DELEGATION REGISTRATION FORM FOR BOARD, STANDING OR OTHER COMMITTEES

For Board Use Only

Delegation No:

- ☐ Public Session
☐ Private Session
☐ Three (3) Minutes

PLEASE BE ADVISED THAT ALL BOARD AND STANDING COMMITTEE MEETINGS (EXCEPT GOVERNANCE AND POLICY COMMITTEE) ARE BEING RECORDED

DELEGATE CONTACT INFORMATION

Full Name: _____

Email: _____

Address: _____

Postal Code: _____

Telephone: _____

DEPUTATION INFORMATION

Please select the applicable Board, Standing, Statutory, Sub and Ad Hoc Committees at which you are requesting to depute:

<input type="checkbox"/> Audit	<input type="checkbox"/> Budget	<input type="checkbox"/> By-Laws	<input type="checkbox"/> Catholic Education and Living our Catholic Values
<input type="checkbox"/> Corporate Services Strategic Planning and Property	<input type="checkbox"/> Governance and Policy	<input type="checkbox"/> Labour Relations	<input type="checkbox"/> Political Action
<input type="checkbox"/> Regular/Special Board	<input type="checkbox"/> SEAC	<input type="checkbox"/> Student Achievement and Well-Being Catholic Education Human Resources	

Date of ~~Presentation~~ Deputation: _____

Topic of ~~Presentation~~ Deputation: _____

Topic or Key Issue(s):

~~Details~~ Brief Summary of the Topic of Deputation:

Action Requested:

SELECT ONE:

☐ I am here as a delegation to speak only on my own behalf.

☐ I am an official representative of the Catholic School Parent Council (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 _____

Note: Any visual or written presentation or material a delegate intends to provide or project on screen during the deputation must be provided 72 hours in advance of the meeting to the Recording Secretary of the Board at delegations@tcdsb.org

Delegates are expected to be respectful and will present concerns in a positive and constructive manner, and maintain a level of decorum which will allow meetings proceed effectively.

By signing this Form, I accept that I have read, understand and agree to comply with the rules for Delegations as per the TCDSB Delegations **and Public Participation** Policy T.14.

Signature_____

Submission Date_____

Please remember to save your completed form to your computer before submitting.

Submit