



NORTH OGDEN ELEMENTARY

(801) 452-4300 • Fax (801) 452-4319 • 530 East 2650 North • North Ogden, Utah 84414 • <http://northogdenelem.wsd.net>

Principal Phil Nestoryak

Secretary Bonnie Nelson

School Community Council Candidate Form

Serving on the School Community Council

Serving on our School Community Council is a wonderful way for parents and teachers to contribute and help improve academic performance at our school. The school receives an annual dividend from the school trust lands. Our council decides how these funds will be used. This year our school received \$40,512.00 from the School LAND Trust Program. The council reviews and prepares other academic plans for our students each year. All plans are reviewed for final approval by our school board. Councils also act in an advisory capacity to school and school district administrations.

Qualifications

Every public school in Utah has a School Community Council. The councils are made up of school employees who are elected by employees and parents who are elected by parents of students attending the school. Membership terms are for two years. Elections should be held at a consistent time for at least four years. We are holding our election at the end of each school year. Four parent positions open. Parent members must have a student attending the school at least one of the two years of their term of service. Employees must be employed by the school district at the school. **We meet as a council 4 to 6 times during the school year right after school.** For more information, please visit www.schoollandtrust.org

Please fill out EITHER the Parent member information OR the Employee member information.

The form is due to the school principal by: **Thursday May 4th**

Form can also be emailed with all pertinent information to principal Nestoryak at phnestoryak@wsd.net

The School Community Council Election will be held: **May 15th & 16th ballots in office**

YES! I would like to serve on the School Community Council.

Parent/Guardian Information:

Parent/Guardian Printed Name: _____

Phone: _____

Email: _____

Name

Grade

I am the parent/guardian of students:

I am also a licensed employee of this school district.

Yes

No

School Employee Information:

School Employee Printed Name: _____

Phone: _____

Email: _____

Signature

Date