



Parents & Citizens Association Office Bearers Nomination Form 2025

Please complete and return to the P&C Secretary at a meeting or by email to: secretary@pandccentheights.com.au

Position:	Pres	sident	Vice President	Treasurer	Secret	tary	
Name:			•••••			•••••	
Address:							
Mobile phone:							
Email address:							
Occupation:		•••••				•••••	
Nominator:		Self Signature:	Date:				
		Endorsed by:1. Name					
			Signature			•	
		Other	1		•••••		
		2 I accept the nomination for the position of					
		Name:					
		Signature:					
Have you been a member of the CI Have you previously been a member			the CHSHS P&C Asso	ociation previously?	Yes Yes	No No	
If so, which	workir	ng group?			•••••		
What skills c	an ya	ou contribute	to the Centenary He	eights State High Scho	ol P&C		
Association	ś				•••••		
					•••••	•••••	
					•••••		
Any other c	omm	ents?					
					•••••		
					•••••	•••••	