



THE WINNIPEG SCHOOL DIVISION
INCLUSIVE EDUCATION ADVISORY COMMITTEE MEMBERSHIP FORM
2023-2024

Name of School			
First Name		Last Name	
Home Address			Postal Code
Email Address			
Please provide contact information (Please provide at least one option):			
Home Phone:	_____	Mobile Phone:	_____
		Business Phone:	_____
Do you have access to the following (Please check all that apply):			
Computer	<input type="checkbox"/>	iPad/Tablet	<input type="checkbox"/>
Smartphone	<input type="checkbox"/>	Wi-Fi	<input type="checkbox"/>
Are you a member of the Parent Council?			
Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Can your phone number/email be provided to (check all that apply):			
Inclusive Education Advisory Committee members	<input type="checkbox"/>	Trustees	<input type="checkbox"/>
Other Advisory Committee Chairpersons	<input type="checkbox"/>	Media	<input type="checkbox"/>
Other Advisory Committee Members	<input type="checkbox"/>		
			_____ Representative's Signature

This personal information is being collected under the authority of the Public Schools Act and will be used for School Board and Advisory Committee related purposes. It is protected by the Protection of Privacy provisions of The Freedom of Information and Protection of Privacy Act and the Personal Information and Protection of Electronics and Documents Act. If you have any questions about the collection, please contact Brenda Lapointe at the address indicated below or by telephone at 789-0469.

Please complete the entire form and return to the
BOARD OFFICE AS SOON AS POSSIBLE
Attention: Brenda Lapointe, Board and Community Liaison Officer/Access and Privacy Coordinator
The Winnipeg School Division
1577 Wall Street East Winnipeg, MB R3E 2S5
The SIGNED form may be scanned and emailed to board@wsd1.org