

TORONTO DISTRICT SCHOOL BOARD - SCHOOL COUNCIL INSURANCE REQUEST FORM

Date:

For Policy Period : November 1, 2017 to November 1, 2018

Email Form To: risk.management@tdsb.on.ca

School:

Names and Positions of School Council Executive Members, including TDSB staff:

| Name | Executive Member Position |
|------|---------------------------|
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Please charge the School Council Budget account for the purchase of School Council Liability Insurance coverage.

Cost Centre:

G/L Account Number:

General Liability Coverage: \$ 140.00
Taxes (RST): \$ 11.20
TOTAL CHARGE: \$ 151.20

Enter the names below to acknowledge this Request (no signature required):

Name

Email

Principal

Name

Email

School Council Chair

