

CATHOLIC INDEPENDENT SCHOOLS

DIOCESE OF PRINCE GEORGE

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CISPG Accessibility Committee Application Form

Date:
Name:
Email:
Phone:
Address:
What group(s) do you represent? ☐ A person with children or youth in a CISPG School with current or emergent considerations related to disability and accessibility ☐ A person who works or volunteers for a CISPG School ☐ A person with disabilities ☐ A person that supports people with disabilities ☐ A person with an Indigenous background Why do you want to be part of this committee?
What related skills, knowledge, or experiences do you have that may benefit this committee?

What accommodations do you require, if any?					

Please send application to cis@cispg.ca