

TDSB Equity Policy Community Advisory Committee Member Application

Mandate

The EPCAC will provide advice to the Toronto District School Board (TDSB) on matters concerning the implementation of the Equity Policy. It will also identify issues of broad community interest regarding equity in education, for the consideration of the TDSB and staff. The EPCAC is comprised of representatives of recognized equity seeking groups across Toronto with an interest in public education, representatives from recognized Community Liaison Groups, parent members, designated TDSB staff and trustees appointed by the Board.

Membership Criteria

- i. Parent/Guardian/caregivers of a current pupil who is enrolled in the TDSB and from various equity seeking communities
- ii. Community representatives from various and separate, equity advocacy organizations and/or alliances and social planning groups that reflect the TDSB's Equity Policy commitments and promote as part of their core mission anti-oppression and equity for one or more of the following communities:
 - persons with disabilities
 - racial and ethno-cultural
 - gender identity and gender expression
 - socio-economic
 - sexual orientation
 - any other communities identified by TDSB Equity Policy or the Ontario Human Rights Code.

Each community representative position should represent a different equity focus, to ensure a diverse range of equity areas are represented to the best possible extent.

Term

The term of office for community and parent representatives of the community advisory committee will be two (2) years; this term will be renewable.

Name: _____

Address: _____

Telephone Number: _____

Email Address: _____

I am willing and available to commit to participating as a voting member of the Equity Policy Community Advisory Committee for a term of two years and hereby submit my notice of intent as to join as:

- Parent/Guardian/Caregiver
- Community Agency Representative
- Union/Federation/Professional Association Representative (non-voting member)
- Another Community Advisory Committee Representative (non-voting member)



PARENT/CAREGIVER/GUARDIAN

I am a Parent / Caregiver / Guardian of a current pupil who is enrolled in the TDSB and from one or more equity seeking communities/identities as noted in the membership criteria above: Yes No

What area of the city do you live in?

- Scarborough
 - Etobicoke
 - North York
 - East York
 - Toronto
 - York
 - Other, please specify:
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COMMUNITY AGENCY

I am the representative of a Community Agency, organization, alliance and/ or social planning group that reflects the TDSB’s equity policy commitments and promotes anti-oppression and equity as part of our core mission:

- Yes No

My organization has a commitment and focus specifically in these following areas:
(select all that apply)

- Anti-Racism and Ethno-cultural Equity
 - Anti-Sexism, Gender-based Violence Prevention
 - Anti-Homophobia, Sexual Orientation Equity
 - Anti-/Transphobia - Gender Identity and Gender Expression Equity
 - Anti-Classism and Socioeconomic Equity
 - Equity for Persons with Disabilities
 - Other communities identified by TDSB Equity policy or and or the Ontario Human Rights Code (please specify):
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Name of Community Agency/Organization: _____

Address: _____

Phone Number: _____

Website URL: _____

Alternate Member (if possible): _____

***Note: Community Organizations and Non-Voting members (designated by CACs and unions/ federations/ associations) seeking membership must submit a letter from the organization’s Director (or executive body in the case of CACs and unions, i.e. Co-Chair/ Presidents) designating the applicant as its representative, as well as naming any alternates. Letters and application forms must be submitted together.**

