

The Honourable _____
Minister of Education
c/o 13th Floor, 315 Front St. W.
Toronto, ON M7A 0B8
educationequitysecretariat@ontario.ca

Date:

This is to confirm that _____ began their role as director of
(Name of Director of Education)
education for the _____ on _____.
(Name of School Board) (Date)

Performance Plan:

☐ Yes, the director of education's performance plan has been put in place for the current
_____ evaluation cycle and has been posted on our board's website.
(interim or full)

Date of Performance Plan Completion:

Signature of the Chair of the Board

Printed Name of the Chair of the Board