Nomination form

Election of parent governors

| Please enter IN BLOCK LETTERS the name and address of the person being nominated for election: | |
|--|--------|
| Name: | |
| Address: | |
| Signature of person nominated: | |
| Signature of proposer (if different to nominee): | |
| Name and address in BLOCK letters of proposer (if different to nominee): | |
| Personal Statement (maximum 250 words) | \neg |
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| I wish to submit my nomination for the election of parent governor. | _ |
| I confirm (i) that I am willing to stand as a candidate for election as a parent governor and (ii) that I a disqualified from holding office for any of the reasons set out in the School Governance (Constitution (England) Regulations 2012. | |
| Signature | |
| Date | |

Completed nomination forms must be returned to the school by <insert date>