



Election of parent governors

Name: _____

Address: _____

Email 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)

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 am not disqualified from holding office for any of the reasons set out in the School Governance Regulations.

Signature _____

Date _____

Completed nomination forms must be returned to the school by 6 June 2017.