



**NOMINATION FORM FOR ELECTION OF PARENT GOVERNOR**

Name of person nominated: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone and Email Address: \_\_\_\_\_

I am the parent/carer of a child at the School and I am willing to serve as a Governor if elected. I understand the commitment involved and will endeavour to attend training to assist me in the role.

I have read the Declaration of Eligibility and can confirm that to the best of my knowledge am not disqualified from election as a governor.

Signature of nominee: \_\_\_\_\_ Date: \_\_\_\_\_

**PERSONAL STATEMENT**

My skills and experience: *(up to 100 words)*

My contribution to the Governing Body to date has been: *(for governors seeking re-election – up to 100 words)*

My contribution to the future work of the Governing Body may include: *(up to 100 words)*

Please return this completed form to the Headteacher **before 12pm** on  
**Wednesday 12<sup>th</sup> October 2022**

