

PG1(d)

## **ELECTION OF PARENT GOVERNOR(S)**

## **NOMINATION FORM**

SCHOOL:		
NAME:	(Mr/Mrs/Miss/	Ms/other)
ADDRESS:		
hours in any the Local Aut Governor of t declaration o for inclusion i	consecutive 1 hority. I here he school. I u f eligibility and n the voting p	I and do not work at the school for more than 500 2-month period and am not an elected member of by nominate myself for election as a Parent understand that, if elected, I will have to provide a d 2 items of proof of identity. A personal statement paper is given overleaf.
SECONDED <sup>9</sup>	BY: NAME:	(Mr/Mrs/Miss/Ms/other)
ADDRESS:		
SIGNATURE	:	

<sup>\*</sup>The seconder must be a parent of a pupil at the school.



PERSONAL STATEMENT to include: Why I am interested in being a school governor and what I can bring to the role: (When completing this section, please include details of generic experience / knowledge / skills you have to offer (these could include professional expertise, community involvement, voluntary work etc). You may also wish to address any specific skills criteria the governing board are
looking for as set out in the nomination letter.

PLEASE PLACE THIS NOMINATION FORM IN A SEALED ENVELOPE MARKED 'NOMINATION FOR PARENT GOVERNOR' RETURN THE ENVELOPE TO THE RETURNING OFFICER BY [TIME] am/pm ON [DATE].