Election of Parent Governors

Nomination Form

Please return this form to the school office by midday on Friday 7th November (by email or as a hard copy)

Your name:	
Address:	
Email address:	
Phone number:	

Please tick ✓

☐ I declare that I have a child on roll at the school and am eligible and willing to serve as a parent governor

☐ I confirm that I am not disqualified from becoming a parent governor (see attached disqualification criteria)

☐ I understand that the post requires me to hold a DBS certificate (the school will apply for the check if you are successful)

☐ I confirm that I am able to fulfil the role including by attending meetings as required, and by contributing to governance work outside formal meetings.

Signed:	
Date:	

Please include a few details about yourself and why you would like to become a governor in the box below (**no more than 100 words**). If an election is needed, this will be circulated to all parents to help them decide who to vote for. You do not have to complete this section, but if you don't you may put yourself at a disadvantage if there is an election.