



PG1(d)

ELECTION OF PARENT GOVERNOR(S)

NOMINATION FORM

SCHOOL:

NAME:
(Mr/Mrs/Miss/Ms/other)

ADDRESS:
.....
.....

I have a child at the school and do not work at the school for more than 500 hours in any consecutive 12-month period and am not an elected member of the Local Authority. I hereby nominate myself for election as a Parent Governor of the school. I understand that, if elected, I will have to provide a declaration of eligibility and 2 items of proof of identity. A personal statement for inclusion in the voting paper is given overleaf.

SIGNED:

SECONDED* BY: NAME:
(Mr/Mrs/Miss/Ms/other)

ADDRESS:
.....
.....

SIGNATURE:

***The seconder must be a parent of a pupil at the school.**