**NOMINATION FORM FOR THE ELECTION OF PARENT GOVERNOR**

**NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **TELEPHONE:**

 **EMAIL:**

 **PEN PORTRAIT (MAXIMUM 150 WORDS)**

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|  |

I wish to submit my nomination for the election of a Parent Governor.

Please return to the school office by 3:00pm 1st December 2021.

I confirm (i) that I am willing to stand as a candidate for election as a parent / staff governor and

(ii) that I am not disqualified from holding office for any reasons set out in the School Governance Regulations.

Signature:

Date:

|  |  |  |
| --- | --- | --- |
|  | **1st nomination** | **2nd nomination** |
| Name: |  |  |
| Address: |  |  |
| Are you a parent/carer at St George’s? |  |  |
| Signed |  |  |
| Date: |  |  |