

## **ELECTION OF PARENT GOVERNOR NOMINATION FORM - September 2024**

Name of Nominee	
Name/s of Pupil/s in school and Class/Classes	·
Signature of nominee Confirming willingness to stand	Date
I, the above named parent, have a child re	egistered at the school and I am willing to serve if elected.
Nominated by	Date
Parent of	
Seconded by Parent of	Date

Personal Statement which I would like to be printed on the voting papers if required Maximum number of words: 100