

**Election of Parent Governors**

**Nomination Form**

**Name:**

**Address:**

*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 declare that I have read and understood the disqualification criteria |

|  |  |  |
| --- | --- | --- |
|  |  | I understand that the post requires me to hold a DBS certificate |

**Signature:**

**Nominated by:** (Self nomination is acceptable)

Name:

**Address:**

**Signature:**

**Candidate’s statement for inclusion on ballot paper:**

Completed nomination must be returned to the school by: **12 noon Monday 2nd November 2020**. Return by email is acceptable – admin@littledean.gloucs.sch.uk