



NOMINATION FORM FOR THE ELECTION OF A CO-OPTED GOVERNOR

Name:

Address:

Telephone:

Pen Portrait (maximum 250 words)

I wish to submit my nomination for the election of Co-opted Governor

I confirm (i) that I am willing to stand as a candidate for election as a parent governor and (ii) that I am not disqualified from holding office for any of the reasons set out in the School Governance Regulations.

Signature:

Date:

Completed nomination forms must be returned to the school by Friday 17TH November 2023.