FAIRMEADOWS FOUNDATION PRIMARY SCHOOL

ELECTION OF PARENT GOVERNOR

NOMINATION FORM

SCHOOL: ……..

NAME: .....
(Mr/Mrs/Miss/Ms**)**

I wish to serve as a Parent Governor and to be a candidate if an election is necessary. I confirm that I am eligible to serve as a school governor. A personal statement (**100 words maximum**) for inclusion in the voting paper is given below.

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

ADDRESS: .....

.....

.....

SIGNATURE: .....

*The seconder must be a parent at the school.

PERSONAL DETAILS (100 words maximum)

PLEASE PLACE THIS NOMINATION FORM IN A SEALED ENVELOPE MARKED 'NOMINATION FOR PARENT GOVERNOR'. RETURN THE ENVELOPE TO THE RETURNING OFFICER (HEADTEACHER) BY 12.00pm ON Tuesday 18th September 2018.