

ELECTION OF PARENT GOVERNORS - NOMINATION FORM

I hereby nominate SURNAME _____

FIRST NAME _____

Please delete as appropriate: Dr/Mr/Mrs/Ms/Miss

ADDRESS: _____

EMAIL. _____ MOBILE PHONE NO _____

PHONE NO (HOME) _____ PHONE NO (WORK) _____

who is parent/guardian of (Name/s) _____

| PROPOSER | SECONDER |
|-------------------------------------------|-------------------------------------------|
| Name: | Name: |
| Address: | Address: |
| Name of child: Date of birth of child: | Name of child: Date of birth of child: |
| Signature: | Signature: |

This form to be returned in an envelope marked Returning Officer to Reception no later than **9am on Monday 8 October 2018**. Forms can be returned by post or from students by hand or electronically to governorelections@jcss.barnet.sch.uk Nominees should attach a short statement of not more than 200 words explaining why they wish to become a Parent Governor. If more nominations are received than there are vacancies, an election ballot will be held and all personal statements will be sent to all parents to enable them to vote.