**NOMINATION FORM FOR THE ELECTION OF A PARENT GOVERNOR**

|  |  |
| --- | --- |
| School: St Joseph’s Catholic Primary School, Middlesbrough | me_school_symbol_transparent.jpg |
| Name and Address of Candidate:  *(parent nominated for election)* | |
| Parent of: *(Pupil’s name)* | |
| Signature of Person nominated: | |
|  |  |
| Name and Address of Proposer: | |
| Parent of: *(Pupil’s name)* | |
| Signature of Proposer: | |
|  |  |
| Candidate’s consent to nomination  I, …………………………………………………………………………………………………………. (*name*)  agree to being nominated as a candidate for election as a Parent Governor on the Local  Governing Body of St Joseph’s Catholic Primary School, Middlesbrough. | |
| Signature: | Date: |
|  |  |
| **When completed, this form must be returned to the school no later than**  **12 noon on Tuesday 15th October 2019** | |

|  |
| --- |
| **Nominated Candidate’s Statement** |
| Please state briefly why you wish to be a governor: (100 words maximum) |
| Please detail any skills and experience you have that you feel would support the work of the Local Governing Body: |