
Election of Parent Governor – Nomination Form

Name of Nominee:

Address:

Contact Telephone:..... Contact Email:

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 be willing to undergo a DBS (Disclosure & Barring Service) criminal record check

Signature:

Date:

Nominated by (n.b. Self-nomination is acceptable):

.....
(Signature, name and address in capitals please)

Candidate's statement for inclusion on ballot paper (no more than 200 words please):

Completed nomination forms must be returned to the school by: **12 noon on Friday 26th May 2023**. They may be posted, handed into the School Reception, or submitted via email to Mrs Ling, Governance Coordinator at:

kling@farlingaye.suffolk.sch.uk
