



## Nomination Form

### Election of Parent Local Governor

Please complete in BLOCK LETTERS the name and address of the person being nominated for election:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Signature of Proposer (if different to nominee) \_\_\_\_\_

Name & Address of Proposer (if different to nominee) \_\_\_\_\_

\_\_\_\_\_

Personal Statement (max. 250 words)

I wish to submit my nomination for the election of parent governor. I confirm that I am willing to stand as a candidate for election for this role and that I am not disqualified from holding office for any of the reasons set out in the articles of association.

Signature of Nominee: \_\_\_\_\_