NOMINATION FORM FOR THE ELECTION OF PARENT GOVERNOR (SECONDARY)

Name of Nominee	
Address	
I wish to submit my r	nomination for the election of Parent Governor.
I confirm:	
(ii) That I am	willing to stand as a candidate for election as a parent governor, and not disqualified from holding office for any of the reasons under the Government Regulations.
Signature	Date
The nominee may se papers.	t out overleaf information about him/herself to go out with the ballot
-	ion forms must be returned to the Academy reception in a sealed arent Governor Nomination' or e-mailed to jo.jaffa@theglc.org.uk by 26th September 2023.
Please see note on ap	ppointment of ex-offenders attached to this form.

Personal Statement (maximum 250 words)	