



Nomination Form for Parent Governor of St Wilfrid's Catholic Secondary School

(Mr/Mrs/Miss/Ms) _____ (full name) of

(full address) _____

(Telephone Number) (Home) _____ (Work) _____

Email _____

Parent/Legal Guardian of _____ (child's name)

I wish to stand for election as a Parent governor of the above school. The following two parents or legal guardians of children attending the school support my nomination:

Signature

Address

1. _____

(Name) _____

2. _____

(Name) _____

Brief election statement:

Signature of Candidate: _____

Date: _____

If you wish to nominate another parent please sign here and ensure that they sign the Declaration of Eligibility

Signature of nominating parent _____

Date: _____

**Please return completed nomination form to the Headteacher to arrive no
later than 10th November 2017**