



## PARENT GOVERNOR VACANCY

# NOMINATION FORM

I am willing to be nominated for the position of Parent Governor at the above-named school.

Full Name (BLOCK LETTERS)	Mr	Mrs	Ms	Miss	
Address					Post code:
Telephone No					
Email Address					
Name of child				Year	

### To the Candidate:

In signing this form you are confirming that:

- a) you wish to be nominated as a prospective School Governor;
- b) you agree to undertake a pre-appointment check and Enhanced Level DBS check (with or without a Child Barred List check as appropriate).

**Please note that, in the event of a ballot, personal statements are typed as written by the nominated parent. Only the first 50 words of the statement will be included (the school name will be counted as one word).**

Signature \_\_\_\_\_

NB *The information you provide may be required by the Department for Education (DfE) for statistical purposes. It will not be made available to any other third party.*

### **PERSONAL STATEMENT (no more than 50 words)**