**This form should be returned to the Headteacher at the school by** **MONDAY 23RD OCTOBER 2023**

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| --- |
| I wish to serve as Parent Governor and to be a candidate if an election is necessary. |
| FULL NAME (*TITLE, FORENAME & SURNAME)**BLOCK CAPITALS PLEASE* | ADDRESS, EMAIL ADDRESS, TELEPHONE NUMBER | SIGNATURE AND DATE | NAME OF CHILD *(with CLASS, YEAR GROUP OR TUTOR GROUP)*  |
|  |  |  |  |

**Personal Statement**

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| --- |
| Please include a brief personal statement (300 words maximum) to support your nomination. Your statement should show how you meet specific skills or experience required by the Local Governing Committee. |

**GOVERNOR ELIGIBILITY SELF DECLARATION FORM**



I have read the summary of disqualifications as set out above and confirm that I am not disqualified from serving as a governor, and that in the event that I am elected to the Local Governing Committee, I will notify the Clerk to the Governing Body immediately should I become disqualified during my term of office.

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**This form should be returned to the Headteacher at The English Martyrs School and Sixth Form College by MONDAY 23RD OCTOBER 2023.**

NOTE: if there are any parts of this form that you cannot answer, cannot sign or which you have questions about, please contact Mrs L Smith (Headteachers PA) who will be willing to advise you.