

NOMINATION FORM FOR THE ELECTION OF A PARENT GOVERNOR

SCHOOL:

The Axholme Academy

Name and address of parent nominated for election

Signature of person nominated

Name and address of proposer

Name and address of seconder

Signature of proposer

Signature of seconder

NOMINATED CANDIDATE'S BIOGRAPHICAL DETAILS:

Please state briefly why you wish to be a Parent governor:
(please delete as applicable)

Please detail any skills and/or experience you have that you feel would benefit the role of parent governor: