

Nomination Form

Election for a Parent Governor for Larkmead School

Your Name: _____

Name & Year(s) of Child(ren): _____

Why I would like to be a parent governor:

(please provide a brief statement of no more than 200 words continuing on a separate sheet if necessary). Please note, your personal statement will be shared with all parents in the event of an election.

Declaration: I have read and understood the Eligibility – Qualifications and Disqualifications criteria, and confirm that I am eligible and able to stand for election as a parent governor. I also confirm that I am able to fulfill the role, including attending meetings as required and by contributing to governance work outside formal meetings.

| | |
|-------------------|--|
| Signature: | |
| Date: | |

(If you could also email this form to office.4125@larkmead.oxon.sch.uk it would be helpful)

