

NOMINATION FORM FOR THE ELECTION OF A PARENT GOVERNOR

George Salter Academy

I wish to stand for election as a Parent Governor of the above Academy.

I confirm that I am a parent/carer or a registered student at the above Academy.

Name			
Address			
Signature		Date	

Your nomination requires a **Proposer** and a **Secunder**, who are also parents/carers of registered students at this Academy.

They must not, however, be your spouse, partner or members of your immediate family.

Proposer's Name			
Address			
Signature		Date	

Secunder's Name			
Address			
Signature		Date	

Please return this form to the Academy Office by Friday 1st December 2017.