

## **De La Salle School Nomination of Parent Governors**

Please enter in BLOCK LETTERS the name and address of the person being nominated for election:

Name of Candidate:	
Address:	
Name(s) of child / children in school and year groups:	d
Name and address in BLOCK LETTERS of proposer (if different to nominee):	
Signature of propose different to nominee):	
Personal Statement (maximum 250 words)	
I wish to submit my nomination for the election of parent governor.	
that I am not disqualifi	villing to stand as a candidate for election as a parent governor and (ii) ed from holding office for any of the reasons set out in the School tion) (England) Regulations 2017.
Candidate	
Signature: Date:	

Completed nomination forms must be returned to the school by Friday 26<sup>th</sup> November 2021