

CHOSEN HILL SCHOOL

Election of Parent Governors Nomination Form

Name:

Address:

Please tick✓

I declare that I have a child on roll at the school and am eligible and willing to serve as a parent governor

I declare that I have read and understood the disqualification criteria as stated in the Financial Agreement, Memorandum & Articles of the Academy Trust on CHS website

I understand that the post requires me to hold a DBS certificate

Signature:

Nominated by*:
(Signature, name in capitals and address)

Candidate's statement for inclusion on ballot paper:

Completed nomination must be returned to the school by:

(Time).....12 noon.....

(date).....Monday 16 October 2023.....

***Self-nomination is acceptable**