

Clifford Primary School

Clifford
Herefordshire
HR3 5HA

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ELECTION OF PARENT GOVERNOR NOMINATION FORM

Name of Nominee:

Address:

The above named parent has a child at the school, is willing to serve if elected, and I would like to nominate him/her for appointment as a Governor of the school.

Nominated by:

_____ Date: _____

Signature and Address

Seconded by:

_____ Date: _____

Signature and Address

Signature of Nominee confirming willingness to stand

Date: _____

Please give overleaf a brief outline of the skills and experiences you feel you can bring to the Governing Body which will be included on the voting paper in the event of an election.

Completed Nomination Forms must be returned to school by **Friday, 15TH March 2019**