

LIVERPOOL COLLEGE PARENT GOVERNOR ELECTION: NOMINATION FORM

This form should be returned to the Clerk to the Governors by 16.00 on 30 September 2021

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| I wish to serve as Parent Governor and to be a candidate if an election is necessary. |
| FULL NAME (*TITLE, FORENAME & SURNAME)**BLOCK CAPITALS PLEASE* | ADDRESS | SIGNATURE AND DATE | NAME OF CHILD *(with CLASS, YEAR GROUP OR TUTOR GROUP)*  |
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| These parents of children currently attending the school support my nomination. |
| FULL NAME(*TITLE, FORENAME & SURNAME)**BLOCK CAPITALS PLEASE* | ADDRESS | SIGNATURE AND DATE | NAME OF CHILD |
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| Please use this space for a brief (100 words maximum) personal statement to support your nomination. This statement, typed in a standard format, with your name, will be circulated to parents if there is a contested election.  |