ROYAL BOROUGH OF WINDSOR AND MAIDENHEAD NOMINATION FORM FOR THE ELECTION OF PARENT GOVERNORS HOLY TRINITY Cofe PRIMARY SCHOOL, COOKHAM

NOMINATION (Self nomination is acceptable)		
I (Mr/Mrs/Miss/Ms)		(Full name)
		_ (Full address)
Being a parent/guardian of		(Child's full name)
who is a registered pupil at the school, do nominat	e	
(Mr/Mrs/Miss/Ms)		(Full Name)
Of		(Full address)
Being a parent/guardian of		(Child's full name)
who is also a registered pupil at the school.		
Signed :	Date:	
CONSENT OF NOMINEE		
I (Full r election. I confirm that I am qualified to be a parent nomination.	name in block letters) have t governor of the school and	read the Rules of the d hereby consent to my
Brief election statement (not more than 200 wo	rds)	
Signed:	Date:	
Closing date for receipt of nominations is 12 noon	on Monday 6 th January 2 th	024

Please note that NO nomination will be accepted after this time.

Officer.

Return the form to the school clearly marked in a sealed envelope for the attention of the Returning