

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 nominate
(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 name in block letters) have read the Rules of the election. I confirm that I am qualified to be a parent governor of the school and hereby consent to my nomination.

Brief election statement (not more than 200 words)

Signed: _____ Date: _____

Closing date for receipt of nominations is **12 noon on Friday 6th June 2025**

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

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