

PARENT GOVERNOR ELECTION

LAWDALE JUNIOR SCHOOL

NOMINATION FORM

I would like to nominate myself/ or

NAME_____

ADDRESS_____

TELEPHONE NUMBER_____

I am or they are the parent/guardian of

NAME OF CHILD_____

SIGNATURE_____

If you are nominating someone else please make sure that they are willing to stand and ask them to sign below.

SIGNATURE_____

STATEMENT

NAME_____

CHILD'S NAME_____

I am standing for election as parent governor because

PLEASE RETURN THIS FORM TO:
Lawdale School Office by 21st October 2025