

NOMINATION FORM

Corbridge Middle School Governing Body

Candidate: _____

Address: _____

Proposed by: _____

Address: _____

Seconded by: _____

Address: _____

Signature of Candidate: _____

Date: _____

NOTE: The candidate, proposer and seconder must be parents or carers of children on the school roll.

I have previous experience of being a governor

I am a member of a board or a trustee, or have been in the past

I am an accountant or have experience of working with accounts