***Shimna Integrated College***

***Board of Governors***

***Election of Parent Governor***

 **Name of Nominee** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Cultural/religious background) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Name of child/children attending Shimna \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Proposed by** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Seconded by** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I agree to stand as a parent governor on the Board of Governors.

 **Signed** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Date** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please return to Danella Goodman in the college office by 4pm on Monday 21 February 2022 *(One nomination form per person to be completed)*

***Shimna Integrated College***

***Board of Governors***

***Election of Parent Governor***

 **Name of Nominee** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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