



Parent Governor Application Form

If you are interested in becoming a Parent Governor please register your interest by completing this form

Section A

| | | | |
|------------|--|-------------------|--|
| Title | | Daytime Telephone | |
| First Name | | Evening Telephone | |
| Surname | | Mobile Number | |
| Address | | Email Address | |
| Address | | | |
| Town | | | |
| Postcode | | | |

Section B

Why do you want to be a school governor and what special skills will you bring to the role? For example - do you have any experience in school improvement, finance, human resources, health and safety or safeguarding?

SIGNATURE:

DATE:

Please return the completed application form to the School Office