**Local Authority governor candidate nomination/appointment form**

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| **NAME OF SCHOOL***(To be completed by school)* |  |
| **SKILLS AND EXPERIENCE****(as required by governing body)***(To be completed by school)* |  |
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| **CANDIDATE PROPOSED BY COUNCILLOR****(including relevant skills/experience)***(To be completed by councillor)* |  |
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| **NOMINATION AGREED BY LOCAL COMMITTEE****(date)***(To be completed by the Area Manager and returned to the Governor Support Team)* |  |
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| **NOMINEE DETAILS FORWARDED TO GB** **(date)***(To be completed by Governor Support Team)* |  |
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| **NOMINEE/GB meeting****(date)***(To be completed by school)* |  |
| **NAME OF PERSON APPOINTED BY GB****(date)***(To be completed by the school and returned to Governor Support Team)* |  |