

Appendix C: Example covering letter for application pack

Dear Parent

Nomination for Parent Governor

Thank you for requesting an application pack for the parent governor vacancy. Contained in this pack are a number of documents that you will need to read and a Parent Governor Election Form which must be completed and returned to *(specify where)* by *(specify date and time)*.

Please read the guidance notes for prospective governors and the qualification and disqualification criteria carefully to ensure you are able to serve as a parent governor. The governing body operates a code of practice which sets an ethos of professionalism and high expectations of governors. This is provided within the pack and should be returned, signed, along with the election form.

Once you have completed section 1 of the Parent Governor Election Form, ask the person nominating you (if not self-nominating) to complete section 2. You can ask a parent of a registered pupil at the school to nominate you but that cannot be your spouse or partner.

It is recommended that all candidates supply a statement of a **MAXIMUM** of 500 words for circulation to voters if a ballot is required. Your statement should set out:

- evidence of the extent to which you possess the skills and experience the governing body desires - see the guidance notes for prospective governors;
- your commitment to undertake training to acquire or develop the skills to be an effective governor;
- if seeking re-election, details of your contribution to the work of the governing body during your previous term of office; and
- how you plan to contribute to the future work of the governing body.

Statements longer than 500 words, for the sake of fairness to all candidates, will have to be reduced. No other information should be circulated to parents at the school in support of your nomination.

Any queries relating to this election should be made to the head teacher who is the Returning Officer for the election.

Yours sincerely

Head teacher and Returning Officer

The following Inclusion questions are optional. (We collect this information for monitoring purposes only). Please tick the appropriate boxes.

I am: Male Female I consider myself to be: Disabled Non-disabled

What is your ethnic group? Choose one section from (a) to (e) then tick the appropriate box to indicate your cultural background or complete the Any Other section:

(a) White: <input type="checkbox"/> British <input type="checkbox"/> Irish	(b) Mixed <input type="checkbox"/> White/Black Caribbean <input type="checkbox"/> White/Black African	(c) Asian/Asian British <input type="checkbox"/> Indian <input type="checkbox"/> Pakistani	(d) Black/Black British <input type="checkbox"/> Caribbean <input type="checkbox"/> African	(e) Chinese <input type="checkbox"/> Chinese
Any other - please specify:				

Section Two - To be completed by the person nominating the candidate (if applicable) (who must not be the spouse or partner of the candidate)

Forename:	Surname:
Address:	
Signature:	

Section Three - To be completed by the clerk or their representative at the end of the appointment process

Please tick if governor is:					
Chair of Governor	<input type="checkbox"/>	Vice Chair	<input type="checkbox"/>	Training & Development Governor	<input type="checkbox"/>
Date of appointment/election:					
Name:				Date:	
Email:				Contact No:	
Any other information:					

To be returned by the clerk to: Governor Development Service, Room 100A, County Hall, Glenfield, Leicester, LE3 8RF