## Local Advisory Board – parent nomination form The Milestone School



**Deadline for nominations:** Monday 14<sup>th</sup> November (noon)

Candidate name:		
Address:		
Email address:		
Contact telephone number:		
Name of child(ren):		
Class of child(ren):		
Nomination statement		
I submit the following information in support of my nomination to be a parent member of the Local Advisory Board (200 words):		
I am interested in becoming a parent member of the LAB because:		
I am able to offer the following skills and experience:		
If elected, I would seek to:		

I confirm that I am a parent, or an individual with parental responsibility of a registered child
at the school and have checked the eligibility criteria to serve as a parent member of the
LAB.

Signed (signature can be typed):	
Date:	

Please return the completed and signed form to the Trust Governance Professional <a href="mailto:kate.shepherd@sandmat.uk">kate.shepherd@sandmat.uk</a>