



Nomination for Membership of the School Advisory Council/Parents' & Friends' Association

Please complete either Section One or Section Two. Please note that the tenure is three years in duration.

Section One – Self-Nomination

I hereby nominate for membership of the School Advisory Council/Parents' and Friends' Association:

Name: _____

Address: _____

Mobile: _____

Email Address: _____

Signature: _____ Date: _____

Section Two – Nomination of Another

I _____ hereby nominate the following person for membership of the School Advisory Council/Parents' and Friends' Association:

Name: _____

Address: _____

Mobile: _____

Email Address: _____

Signature: _____ Date: _____

Agreement of Nominee

I am willing to be nominated for membership of the School Advisory Council/Parents' and Friends' Association:

Name: _____

Address: _____

Mobile: _____

Email Address: _____

Signature: _____ Date: _____

Please return completed forms to the College Reception **by 4.00pm on Monday 12 February 2024.**