School Board Election NOMINATION FORM

Parent representative / Staff representative / Student representative (circle one)

School Name	'	Fapamoa College	
School profile Nur	mber (6963	
		uld be posted or delivered to the Returning Office moa 3118 or PO Box 11 150 Pāpāmoa 3151	r – Linda Horscroft at
o that it is received	d no late	er than noon – 12 pm on <u>Wednesday 6 August</u>	<u> 2025</u>
lominator Detai	ils		
Full Name			
Address/Email			
Phone			
Signature			
IOTE: The nominato	r must be	e on the roll for the election, otherwise the nomination is	s invalid.
andidate detail	ls		
Full Name			
Email			
Phone			
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