



NOMINATION FORM

Parent representative / Staff representative / **Student representative**

School Name	Wellington Girls' College
School profile Number	272

This nomination paper should be posted or delivered to the Returning Officer at PO **Box 12-471, Wellington North 6144** or by handing in to the **Student Office, Wellington Girls' College** so that it is received **no later than noon (12PM) on TUESDAY 25 August 2026**.

Nominator Details

Full Name	
Address/Email	
Phone	
Signature	

NOTE: The nominator must be on the roll for the election, otherwise the nomination is invalid.

Candidate details

Full Name	
Email	
Phone	

Candidate declaration of eligibility

I declare that I have read and understand the ineligibility criteria for school board members, under clauses 9 and 10 of Schedule 23 of the Education and Training Act 2020, and declare that I am eligible to become a board member. I hereby consent to the above nomination and declare that all other information that I have listed on this form is true and correct.

Date	Signature of Candidate
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Candidates are requested to complete the following on an optional basis*:

- Gender: Female / Male / Gender Diverse (circle one)
- Previous experience: (tick one)
 - Current representative standing for re-election ☐
 - Current co-opted or appointed board member standing for election ☐
 - Not a current member but have previously been a member of a school board ☐
 - No previous board experience ☐
 - Other ☐
- Ethnicity: Which ethnic group or groups do you identify with? (tick as appropriate)

☐ NZ Māori	☐ European (Including NZ European/Pākehā)	☐ Asian
☐ Pacific people	☐ Middle Eastern/Latin American/African (MELAA)	☐ Other

**This candidate information is collected by the Ministry of Education for statistical purposes only and will not be used in a manner in which you may be identified. This information is not required for valid nomination.*