



St. Angel's School

SENIOR SECONDARY
(Recognised & Affiliated to C.B.S.E.)

A-Block, Sector-15, Rohini, Delhi-110089, Phone : 011 - 27291521, 27294021, 27298621

E-mail : stangelsrohini@gmail.com, Website : www.stangelsrohini.com

Ref. No.

Dated

Election of Executive Committee of the Parents Teachers Association for the year 2023-24 & 2024-25.

NOMINATION FORM

We the parent of the under mentioned students of the School, hereby sponsor/second

the candidature of Ms./Mr. _____ Mother/Father

of _____ of Class _____, for election to the
Executive Committee of PTA of St. Angels School, Rohini as parent representative of Cluster
No. _____ :

S.No	Name of Parent sponsoring the candidature	Ward's Name	Class & Section	Parent's Signature
1				
2				

I, _____ Father/Mother of _____ student of Class _____
accord consent to my candidature for Election to the Executive Committee
of PTA.

I hereby declare/undertakes as under:-

- I have paid all School dues of my ward (s) for the academic session 2023-24 and other outstanding dues (if any) as per existing structure.
- I will be allowed entry inside the School premises, on the day of election, only on the production of I Card of my ward.
- I will not be allowed to bring cell phone in the School premises on the day of election.
- I will always maintain discipline and associate in the smooth functioning of the School,
- I accept all the rules and guidelines laid down for the election of Executive Committee of the PTA.
- The decision of the Returning Officer(s) shall be final and binding.
- I have read and understood the aims and objectives of P.T.A and shall abide by those in letter & spirit.
- The sponsoring parent belongs to the same cluster and has cleared all the dues of the school till date.

Signature of the candidate _____

Name of candidate _____

Date : _____

Detail of Candidate attached below

CONTINUED ON PAGE NO. 2

DETAILS OF CANDIDATE

1 Name : _____

2 Professional Details of Candidate:

- Profession: _____

- Designation & Particular of organization (if applicable): _____

3 Number of Children studying in the School: _____

4 Details of Children:

a) Name _____ Class & Section: _____

b) Name _____ Class & Section: _____

5 Number of years the children have studied at the School: _____

6 School's contribution in your ward's progress:

7 If elected, I would contribute:

Signature of the candidate _____

Name of Candidate _____

Date _____

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DECLARATION/UNDERTAKING

I _____ resident of _____

_____ Son/ Daughter/Wife of _____

_____ Aged _____ do hereby declare
that all the details and information provided in the Nomination/ Details form is true and
correct to the best of my knowledge and belief. I also declare that I am eligible to be a
candidate. I further declare that, if elected, I will act in a manner that is not detrimental to
the welfare of students/faculty/employees of the School.

I also undertake that if I have provided incorrect information or have misrepresented any
facts or information with the intention to gain eligibility as a candidate for election to the
Executive Committee of (PTA), the School will be empowered to cancel my candidature.

(Signature of Candidate)

Date :- _____

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ACKNOWLEDGEMENT

Received Nomination form of Mr./Mrs. _____ for

Cluster No _____ Nomination No _____

Date _____

Signature of Receiving Officer of the School