

**APPLICATION AND NOMINATION FORM**

**FOR PROSPECTIVE**

**MEMBER,**

**DIRECTOR,**

**CO-OPTED GOVERNOR**

**PARENT GOVERNOR**

**PLEASE COMPLETE ALL ASPECTS OF THIS FORM IN CAPITAL LETTERS**

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| **Basic Information** | | |
| **Title** |  | |
| **First Name** |  | |
| **Surname** |  | |
| **Previous surname (if**  **none, please state ”none”)** |  | |
| **Date of Birth** |  | |
| **Nationality** |  | |
| **Country of Birth** |  | |
| **Contact information** | | |
| **Address** |  | |
| **Postcode** |  | |
| **Home telephone no** |  | |
| **Mobile telephone no** |  | |
| **Email Address** |  | |
| **Preferred form of contact** |  | |
| **Name of the Academy/Board you are applying for** |  | |
| **Please tick the below that you are applying to be considered for** | | |
| **Co-Opted Academy Governor** |  | |
| **Trust Member** |  | |
| **Trust Director/Trustee** |  | |
| **Parent Academy Governor** |  | |
| **Are you a parent of a pupil at an academy within Exceed Learning Partnership?**  **If yes, please state which academy.** | | Yes / No |
| **Are you a Member, Director Trustee, Local Governor (or equivalent), Parent Governor, Staff Governor at any other school, academy or Trust?**  **If yes, please give details.** | | Yes / No |
| **Are you related to a member of staff, local governor, Director or member within Exceed Learning Partnership or one of its academies?**  **If yes, please state name and their position/location of association.** | | Yes / No |

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| **The Value you can Bring** | |
| **Have you been a Governor at a school or an academy before?**  **If you ticked yes, please name the school/academy:** | Yes / No |
| **Are you related to an employee of a Doncaster school/academy?**  **If yes, please give details.** | Yes / No |
| **Have you been or are you employed at a school/academy in Doncaster?**  **If yes, please give details.** | Yes / No |
| **Have you been or are you currently employed by the Local Authority?**  **If yes, please give details.** | Yes / No |
| **Do you have time to attend meetings and visit the academy, during working hours, on a regular basis?** | Yes / No |
| **Are you prepared to undertake appropriate Governor training?**  **If yes, please give details.** | Yes / No |
| **Do you consider yourself to have a disability, as defined in the Disability Discrimination (Amendment) Act 2005** | Yes / No |
| **Please give details of any special needs provision you would require (eg wheelchair access/help for dyslexia)** |  |

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| **SPECIALIST KNOWLEDGE AND/OR EXPERIENCE** | | | |
| *Please be aware that you will not be required to use your specialist knowledge and/or experience in a professional capacity. These skills will help you ask challenging questions and hold the schools’/academies’ decisions and performance to account. Please tick where appropriate* | | | |
| **Knowledge and/or Experience** | **Basic** | **Moderate** | **Extensive** |
| School improvement |  |  |  |
| Financial management/accountancy |  |  |  |
| Premises and facilities management |  |  |  |
| Human Resources |  |  |  |
| Procurement/purchasing |  |  |  |
| Law |  |  |  |
| ICT and management systems |  |  |  |
| PR and marketing |  |  |  |
| Children and young people’s services |  |  |  |
| Health services |  |  |  |
| Safeguarding |  |  |  |
| Project management |  |  |  |
| Health and Safety |  |  |  |
| Languages |  |  |  |
| Sciences |  |  |  |
| Technology |  |  |  |
| Sales/retail/services |  |  |  |
| Fundraising |  |  |  |
| Volunteering |  |  |  |
| **OTHER (please specify below)** | | | |
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| **PLEASE OUTLINE WHY YOU FEEL YOUR SKILLS AND EXPERIENCE WOULD MAKE YOU EFFECTIVE FOR THE ROLE –**  ***FOR PARENT GOVERNOR APPLICATIONS PLEASE NOTE THAT THIS STATEMENT WILL SUPPORT YOUR NOMINATION AND WILL BE CIRCULATED WITH THE BALLOT PAPER IF A BALLOT BECOMES NECESSARY*.** |
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**REFERENCES**

You are obliged to provide details of at least one referee, and ideally two. These can be business or personal and will have known you for at least two years. Please provide at least one means of contact for each referee.

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| **Reference 1 (Name of Proposer if applying to become Parent Governor)** | |
| **Title** |  |
| **First Name** |  |
| **Surname** |  |
| **Contact Address** |  |
| **Post Code** |  |
| **Tel No:** |  |
| **Email:** |  |
| **Please indicate whether business or personal reference:** |  |

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| **Reference 2 (Name of Seconder if applying to become Parent Governor)** | |
| **Title** |  |
| **First Name** |  |
| **Surname** |  |
| **Contact Address** |  |
| **Post Code** |  |
| **Tel No:** |  |
| **Email:** |  |
| **Please indicate whether business or personal reference:** |  |

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| **How you found out about the vacancies on the Governing Body/Directors Board/Members Board? Please enter details using the relevant box below** | **Please tick and provide details below** |
| **Academy** |  |
| **Local Press** |  |
| **Leaflet** |  |
| **Word of Mouth** |  |
| **Advert** |  |
| **Through your employer** |  |
| **Membership of an Organisation or institution** |  |
| **Other (please state)** |  |

**RECRUITMENT AND EQUAL OPPORTUNITIES MONITORING**

The information collected in this form is used for statistical purposes and will be recorded on a computer database. This data helps Exceed Learning Partnership to do all it can to ensure that appointments are made on merit and to help ensure that Governing Bodies are representative of the communities they serve.

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| **Gender** | | **Ethnic Origin** | |
| ***Female*** |  | ***White*** | |
| ***Male*** |  | ***British*** |  |
| ***Trans-Gender*** |  | ***Irish*** |  |
| ***Prefer not to say*** |  | ***White Other*** |  |
| **Sexual Orientation** | | **Asian or Asian British** | |
| ***Bangladeshi*** |  |
| ***Bi Sexual*** |  | ***Indian*** |  |
| ***Gay Man*** |  | ***Pakistani*** |  |
| ***Gay Woman/Lesbian*** |  | ***Chinese*** |  |
| ***Heterosexual*** |  | ***Any Other Asian*** |  |
| ***Prefer not to say*** |  | **Black and Black British** | |
|  |  | ***African*** |  |
| **Age Band** | | ***Caribbean*** |  |
| ***16-24 years*** |  | ***Any Other Black*** |  |
| ***25-34 years*** |  | **Mixed** | |
| ***35-49 years*** |  | ***White and Asian*** |  |
| ***50-54 years*** |  | ***White and Black African*** |  |
| ***55 and over years*** |  | ***White and Black Caribbean*** |  |
| ***Prefer not to say*** |  | ***Any Other Mixed*** |  |
|  | | **Other Ethnic Background** | |
| ***Please Describe*** |  |
| **Religion/Belief** | | | |
| ***Buddhist*** |  | ***Sikh*** |  |
| ***Christian*** |  | ***Roman Catholic*** |  |
| ***Hindu*** |  | ***No Religion*** |  |
| ***Muslim*** |  | ***Other*** |  |
| ***Jewish*** |  | ***Prefer not to say*** |  |
| **Disability – Do you consider yourself to have a disability as defined by the Disability Discrimination Act?** | | | |
| ***Yes*** |  | ***No*** |  |
| ***Please state briefly the nature of your disability*** |  | ***Prefer not to say*** |  |

*The information that you provide on this form will be held on a computerised database maintained Exceed Learning Partnership. Your data will be used in accordance with the principles set out in the Data Protection Act (DPA) 1998, which protects the right to privacy of individuals whose personal details are held on such databases. Exceed Learning Partnership will only make your details available to academies and their Governing Bodies.*

*Under School/Academy Governance Regulations, certain people are disqualified from serving as Governors. The following page gives information on the categories of disqualification.*

*Exceed Learning Partnership is committed to safeguarding and promoting the welfare of children and expects Governors to share this commitment.*

*You should be aware that this position may be subject to an enhanced Disclosure and Barring Check (DBS).*

*Please sign below to confirm that you are not disqualified from serving as a Member/Director/ Governor, that you agree to undertake an enhanced Disclosure and Barring Service (DBS) check and that the information you give on this form can be recorded and used by Exceed Learning Partnership in accordance with the Data Protection Act.*

*The Trust/academies will process every application regardless of gender, age, disability, sexual orientation, race, religion and belief and social exclusion.*

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DECLARATION**

I declare that I am not disqualified from serving as a Member/Director/Governor and that:

* **I am** not a registered pupil at the school.

* **I am** aged 18 or over at the date of this election or appointment.

* **I do not** already hold a Governorship of the same academy.

* **I have not** failed to attend Governing Body meetings for a continuous period of six months without the consent of the Governing Body.

* **I am not** the subject of a bankruptcy restrictions order or an interim order, debt relief restrictions order, an interim debt relief restrictions order or had my estate sequestrated and the sequestration has not been discharged, annulled or reduced.

* **I am not** subject to a disqualification order or disqualification undertaking under the Company Directors Disqualification Act 1986, a disqualification order under Part 2 of the Companies (Northern Ireland) Order 1989, a disqualification undertaking accepted under the Company Directors Disqualification (Northern Ireland) Order 2002, or an order made under section 429

(2) (b) of the Insolvency Act 1986. (Failure to pay under a County Court administration order.)

* **I have not** been removed from the office of charity trustee or trustee for a charity by the Charity Commission or Commissioners or High Court on the grounds of any misconduct or mismanagement, or under section 34 of the Charities and Trustee Investment (Scotland) Act 2005, from being concerned in the management or control of any body.

* **I am not** included in the list of teachers or workers (considered by the Secretary of State as unsuitable to work with children or young people).

* **I am not** barred from any regulated activity relating to children.

* **I am not** subject to a direction of the Secretary of State under Section 128 of the Education and Skills Act 2008.

* **I am not** disqualified from working with children or from registering for child minding or providing day care.

* **I am not** disqualified from being an independent school proprietor, teacher or employed by the Secretary of State.

* **I have not** beensentenced to three months or more in prison (without the option of a fine) in the five years before becoming a Governor or since becoming a Governor.

* **I have not** received a prison sentence of two years or more in the 20 years before becoming a Governor.

* **I have not**, at any time, received a prison sentence of five years or more.

* **I have not** been fined, for causing a nuisance or disturbance on school or on educational premises during the five years prior to or since appointment or election as a Member/Director/Governor.

* **I will** undertake an enhanced Disclosure and Barring Service (DBS) check.

* **I will** adhere to the Governing Body Code of Conduct

* **I will not** use social networking sites irresponsibly and will ensure that neither my personal/professional reputation nor the Trust’s/academy’s reputation is compromised by inappropriate postings. Any such postings could lead to my suspension or removal from the Governing Body.

* **I agree** for details of my position as Governor to be included on the school website.

* **I will**, annually, declare any business interests and agree for these to be published on the school website, in line with the regulations.

### Disqualification criteria

A person shall not serve as a Member/Director/Co Opted Governor/Parent Governor if s/he:

* has been declared bankrupt and/or their estate has been seized from their possession for the benefit of creditors and the declaration or seizure has not been discharged, annulled or reduced; or is the subject of a bankruptcy restrictions order or an interim order;
* Is subject to a disqualification order or a disqualification undertaking under the Company Directors Disqualification Act 1986 or to an order made under section 429(2)(b) of the Insolvency Act 1986 (failure to pay under county court administration order);
* Has ceased to be a Director by virtue of any provision in the Companies Act 2006, is disqualified from acting as a Director by virtue of section 178 of the Charities Act 2011 (or any statutory re-enactment or modification of that provision);
* has been removed from the office of charity Trustee or Trustee for a charity by an order made by the Charity Commission or the High Court on the grounds of any misconduct or mismanagement in the administration of the charity for which s/he was responsible or to which s/he was privy, or which s/he by his/her conduct contributed to or facilitated;
* has at any time, been convicted of any criminal offence, excluding any that have been spent under the Rehabilitation of Offenders Act 1974 as amended, and excluding any offence for which the maximum sentence is a fine or a lesser sentence except where a person has been convicted of any offence which falls under section 178 of the Charities Act 2011;
* has not provided to the Directors a criminal records certificate at an enhanced disclosure level under section 113B of the Police Act 1997. In the event that the certificate discloses any information which would in the opinion of either the Chair, CEO or Principal confirm their unsuitability to work with children that person shall be disqualified.

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### Declaration

I confirm that to the best of my knowledge the information provided is accurate and I know of no reason why I would not be suitable to serve as a Member/Director/Co-Opted Governor/ Parent Governor of Exceed Learning Partnership (refer to disqualification criteria).

I recognise that my appointment is subject to an enhanced DBS and Section 128 check

If appointed, I accept that my name and details about my role as a Director/Trustee/Member/Governor will be published on Exceed Learning Partnership’s website and the Department for Education public database. My postcode, date of birth, any previous names, nationality and country of birth will also be shared with the Department for Education but will not be published.

As a Governor my name and details about my role will be published on the academy website and will also be shared with the Department for Education.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please return to the academy or if applying to be a Member or Director Andy Hibbitt

coo@exceedlearningpartnership.com

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