

Clarion Academy Trust

Governor Application form

Please complete this form and email to clerk.schoolsloddon@gmail.com **by 27 April 2018**

Please phone 01508 520359 for further advice or a copy of this form in another format if required.

PART A: PERSONAL DETAILS

Title: _____ Surname: _____

Forename(s): _____ Known as: _____

Retired: Yes/No Occupation: _____ Current Employer _____

Date of Birth: _____ Age range: (tick which applies) Under 30, 30 to 39, 40 to 49, 50 to 59, 60 +

Home Address: _____

_____ Postcode: _____

Home telephone: _____ Daytime telephone: _____

Mobile telephone: _____

Email address: _____

If you have past or present experience of being a school governor, please name your last school and give dates of service:

School Name: _____ From: _____ To: _____

PART B: ELIGIBILITY CRITERIA

Do you intend to hold more than 3 school governor posts? Yes/No

Are you adjudged bankrupt or under a composition arrangement with your creditors or subject to a Bankruptcy Restrictions Order? Yes/No

Are you employed by a school? Yes/No
(if 'yes' name school) _____

Have you a financial interest in the supply of goods or services to a school? Yes/No

Are you or have you ever been disqualified from being a company director or a trustee of a registered charity? Yes/No

Have you been convicted within the previous 5 years of an offence with a prison sentence of 3 months or more whether suspended or not without the option of a fine? Yes/No

Are you related to a member of staff at the school? Yes/No

Clarion Academy Trust

- Are you currently teaching in this school? Yes/No
- Have you ever taught in this school? Yes/No
- Do you or will you have a child attending this school? Yes/No

PART C: SKILLS, KNOWLEDGE AND EXPERIENCE

Please tell us about your knowledge, skills or experience below.

Complete by expanding the space and you do not have to complete all of the following.

1. HUMAN RESOURCE MANAGEMENT:
(ie managing, motivating or developing staff, selecting and appointing staff or handling employment issues)
2. FINANCIAL MANAGEMENT:
(ie managing finances of an organisation or acting as an accountant or an auditor)
3. SERVICES for CHILDREN AND YOUNG PEOPLE:
(eg education, training or development, special needs, pastoral care and welfare)
4. OTHER:
(eg leadership, communications, team working, problem solving skills)

PART D: DECLARATION

I confirm that the information I have recorded on this form is true and complete to the best of my knowledge. I understand that if my application is successful and any of this information is found to be incorrect or untrue, my tenure of office may be terminated.

I understand and accept the information that I have provided on this form will be held on a computerised database. The data will be used in accordance with the principles set out in the Data Protection Act 1998. Clarion Academy Trust will only make candidates details available within the Trust. We will also use this data for mailing information to you as and when required.

I understand and accept that an appointment is subject to a criminal record check.

If you are appointed as a governor, your contact details will be used to notify you of training courses.

Signature: _____ Date: _____