EMMANUEL
SCHOOLS FOUNDATION

APPLICATION FORM
FOR THE APPOINTMENT
OF A LOCAL GOVERNOR/OR
TRUSTEE/OR MEMBER

Emmanuel Schools Foundation

Trinity House Bede Academy Sixth Avenue
Blyth Northumberland NE24 2SY
Tel: 01670 543 566 Fax: 01670 543 596
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Company Registration No. 4464331

EMMANUEL SCHOOLS FOUNDATION

If you have any questions about completing this form please contact Christine Taylor, Emmanuel Schools Foundation, Company Secretary

APPLICATION FORM FOR THE APPOINTMENT OF LOCAL GOVERNOR/OR TRUSTEE

PLEASE COMPLETE IN CAPITAL LETTERS

FAMILY NAME/SURNAME _____

FORENAMES _____ TITLE _____

ADDRESS _____ TELEPHONE NUMBERS

_____ HOME _____

_____ WORK _____

POSTCODE _____ MOBILE _____

E-MAIL _____

PROPOSED ACADEMY APPOINTMENT _____

THE VALUE YOU CAN ADD AS A GOVERNOR/TRUSTEE

Why do you want to be considered for appointment as a Governor/Trustee? *Please outline your reasons for showing an interest in becoming a Governor/Trustee - including details of personal qualities, experiences or skills you feel you could bring to a Governing Body and any links that you have with schools and their communities eg PTA, local groups, businesses etc.. Please continue on a separate sheet if necessary. (Please use at least 100 words)*

_____

_____

_____

_____

_____

_____

_____

_____

_____

Are you related to an employee at the Academy or the Emmanuel Schools Foundation? *(Please tick one box)*

YES ☐ NO ☐

If you ticked yes, please give details: _____

_____

Are you related to a member of the Academy Governing Body or the Board of the Emmanuel Schools Foundation? *(Please tick one box)*

YES ☐ NO ☐

If you ticked yes, please give details: _____

_____

Have you been or are you employed at a school? *(Please tick one box)*

YES ☐ NO ☐

If you ticked yes, please give details: _____

_____

Are you currently a School Governor?

YES NO _____

If you ticked yes, please give details: _____

_____

Do you have children of school age? *(Please tick the box if this applies to you)* ☐

If you did tick the box, which school/s do they attend? _____

_____

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.

Referee 1: Name _____

Contact Address: _____

_____ Post Code _____

Tel No: _____ E-mail: _____

Please indicate whether business or personal. _____

Referee 2: Name _____

Contact Address: _____

_____ Post Code _____

Tel No: _____ E-mail: _____

Please indicate whether business or personal. _____

Do you have time to attend meetings and visit the Academy, in school hours, on a regular basis?

YES ☐ NO ☐

Are you prepared to undertake appropriate Governor training?

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)

_____

_____

_____

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 the Emmanuel Schools Foundation 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.

Gender

- Female ☐
- Male ☐
- Trans-Gender ☐
- Prefer not to say ☐

Sexual Orientation

- Bisexual ☐
- Gay Man ☐
- Gay Woman/Lesbian ☐
- Heterosexual ☐
- Prefer not to say ☐

Age Band

- 16-24 years ☐
- 25-34 years ☐
- 35-49 years ☐
- 50-54 years ☐
- 55 and over years ☐
- Prefer not to say ☐

Do you consider yourself to have a disability?

- Yes ☐
- No ☐
- Prefer not to say ☐

Ethnic Origin

White

- British ☐
- Irish ☐
- White Other ☐

Asian or Asian British

- Bangladeshi ☐
- Indian ☐
- Pakistani ☐
- Any Other Asian ☐

Black and Black British

- African ☐
- Caribbean ☐
- Any Other Black ☐

Mixed

- White and Asian ☐
- White and Black African ☐
- White and Black Caribbean ☐
- Any Other Mixed ☐

Other

- Chinese ☐
- Any Other ☐
- Prefer not say ☐

Religion/Belief

- Buddhist ☐
- Christian ☐
- Hindu ☐
- Jewish ☐
- Muslim ☐
- Sikh ☐
- Other ☐
- None ☐

Prefer not to say ☐

The information that you provide on this form will be held by the Emmanuel Schools Foundation Company Secretary. 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. The Company Secretary will only make your details available to Emmanuel Schools Foundation schools and their Governing Bodies.

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

Emmanuel Schools Foundation 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 Service (DBS) check

Please sign below to confirm that you are not disqualified from serving as a School 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 the Local Authority in accordance with the Data Protection Act.

Emmanuel Schools Foundation processes every application regardless of gender, age, disability, sexual orientation, race, religion and belief and social exclusion.

Signature _____ Date _____

PLEASE RETURN THE COMPLETED FORM TO CHRISTINE TAYLOR, COMPANY SECRETARY, TRINITY HOUSE, SIXTH AVENUE, BLYTH, NORTHUMBERLAND, NE24 2SY TELEPHONE 01670 543566.

Your application form will be considered by the Chairman and you will be notified of the outcome in writing.

GOVERNOR/TRUSTEE DECLARATION FORM

Name _____
(Block Capitals please)

Address _____

_____

_____

Postcode _____

Tel (home) (_____) _____

(work) (_____)_____

(mobile) _____

E-mail address _____

Name of School _____

I declare that I am not disqualified from serving as a School Governor/Trustee 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 school.
- **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 restriction order, an interim bankruptcy restrictions order, a debt relief restrictions order or an interim debt relief restrictions order.
- **I have not** 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 2002, a disqualification undertaking accepted under the Company Directors Disqualification (Northern Ireland) Order 2002, or subject to 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 trustee for a charity by an order made by the Charity Commissioners or the High Court on the grounds of any misconduct or mismanagement in the administration of the charity for which I was responsible or to which I was privy, or to which I have contributed or which I have facilitated by my conduct or have been removed 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 kept under section 1 of the Protection of Children Act 1999 (list of people considered by the Secretary of State as unsuitable to work with children).

- **I am not** subject to a direction of the Secretary of State under section 142 of Education Act 2002 (or any other disqualification, prohibition or restriction which takes effect as if contained in such a direction).

- **I am not** disqualified from working with children under sections 28, 29 and 29A of the Criminal Justice and Court Services Act 2000.

- **I am not** disqualified from registration under Part 2 of the Children and Families (Wales) Measure 2010 for child minding or providing day care.

- **I am not** disqualified from registration under Part 3 of the Childcare Act 2006.

- **I have not** been convicted, whether in the United Kingdom or elsewhere, of any offence and had passed a sentence of imprisonment (whether suspended or not) for a period of not less than three months without the option of a fine.

- **I have not** received a prison sentence of 2½ 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 Governor.

- **I have not** refused an application being made to the Disclosure and Barring Service to complete a DBS Application Form.

- **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 school's reputation is compromised by inappropriate postings. Any such postings could lead to my suspension or removal from the Governing Body.

Signature _____ Date_____

Please return to: Christine Taylor
Emmanuel Schools Foundation
Trinity House
Sixth Avenue
Blyth
NE24 2SY