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**Foundation Governor Application Form**

**BEFORE COMPLETING THIS FORM PLEASE NOTE THE FOLLOWING ELIGIBILITY CRITERIA IF YOUR APPLICATION IS FOR A SPECIFIC SCHOOL**

1. Only someone who is a practising Catholic will be appointed as a Foundation Governor
2. Employees of the school or college, whether in a teaching or support capacity, other than on a casual and limited hours’ basis will not be appointed as Foundation Governors.
3. A former member of the School Leadership Team, unless a period of no less than 3 years has expired will not be appointed as a Foundation Governor.
4. The spouse, parent, child or sibling of any member of the school or college staff, whether teaching or support and in the employment of the governing body will not be appointed as a Foundation Governor.
5. The spouse, parent, child or sibling of any member of the governor body whether elected or appointed will not be appointed as a Foundation Governor.

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| **SECTION 1 - PERSONAL INFORMATION** |
| **Title**  |  | **Surname:** |  | **First Names:** |  |
| **Home address:** |  |
|  | **Post Code:** |  |
| **Home Tel No:** |  | **Mobile Tel No:** |  |  |
| **Email address:** |  |  |  |
| **Date of Birth:** |  **/ /** | **Place of birth:** |  |
| **Occupation:** |  |

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| **SECTION 2 - SCHOOL FOR WHICH YOUR APPLICATION IS BEING MADE** |
| **Name of School** |  |
| **Address** |  |
|  **Please circle****Are you a paid employee at the school? YES/NO****If YES, please detail****Are you related to a member of staff or governor of the above named school? YES/NO****If YES, please detail****Do you have any children currently attending the above named school? YES/NO****If YES please state which year group(s). …………………………………………………………………………………** |

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| **SECTION 3 - SKILLS AUDIT**Please indicate with a tick in the appropriate box below whether you fully, partially or do not meet each of the statements listed below: |
| **Catholic Commitment** | **Fully meet** | **Partially meet** | **Do not meet** |
| I am a practising Catholic in full communion with the See of Rome. |  |  |  |
| I am willing to protect the assets of the Trustees at all times. |  |  |  |

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| **Prior Knowledge and Experience** | **Fully meet** | **Partially meet** | **Do not meet** |
| I have previously been a governor at this or another school. |  |  |  |
| I have previous experience of Chairing meetings. |  |  |  |
| I have experience of working as a team to achieve shared goals in either a professional or voluntary setting. |  |  |  |
| I have experience of working in a setting that is underpinned by a cycle of formal structured planning, monitoring, evaluation, review and reporting. |  |  |  |
| I have experience of working within a school setting and understand the need to raise standards and achievement and the roles that governors and Ofsted have in this process. |  |  |  |

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| **General and Specialist Skills** | **Fully meet** | **Partially meet** | **Do not meet** |
| I have experience within an educational setting (please indicate which if applicable) – EYFS / Primary / Secondary / HE / FE. |  |  |  |
| I have HR expertise including experience of staff recruitment. |  |  |  |
| I have experience of performance management and/or staff appraisal. |  |  |  |
| I have knowledge and experience of ICT and/or management information systems. |  |  |  |
| I have knowledge of Special Educational Needs. |  |  |  |
| I have knowledge of Equal Opportunities. |  |  |  |
| I have knowledge and understanding of Safeguarding within schools. |  |  |  |
| I have financial or accounting knowledge or expertise. |  |  |  |
| I have legal knowledge or expertise. |  |  |  |
| I have experience of Health & Safety and Risk Assessment. |  |  |  |
| I have experience of Premises and Facilities Management. |  |  |  |
| I have experience of Procurement, Purchasing and Contract Management. |  |  |  |

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| **Local and Community Knowledge** | **Fully met** | **Partially met** | **Do not meet** |
| I have prior knowledge and involvement with this school. |  |  |  |
| I know the local community that the school serves. |  |  |  |
| I have knowledge of the local / regional economy and local government. |  |  |  |

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| **Other Skills** | **Fully meet** | **Partially meet** | **Do not meet** |
| I have experience of strategic planning. |  |  |  |
| I have experience of handling complaints, grievance and appeals. |  |  |  |
| I have experience of problem-solving. |  |  |  |
| I am able to question and challenge in a positive manner. |  |  |  |

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| **SECTION 4 – DECLARATION****I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Enter your full name)** * am a practising Catholic;
* am a Catholic priest/deacon in the Diocese of Lancaster

(delete as applicable)I wish to offer to serve the Diocese of Lancaster as a foundation governor. I have read and understood the criteria for appointment and, to the best of my knowledge am eligible for appointment.In offering to serve as a foundation governor in the Diocese of Lancaster, I undertake that I will serve the Bishop faithfully. If appointed, I declare that I will be able and willing to give appropriate priority to my duties as a governor and will undertake to discharge these duties with due care and diligence.I will undertake:* To preserve and develop the Catholic character of the school or college to which I am appointed;
* To ensure that the school is conducted in accordance with its trust deed, which included the provision of:
	+ Canon Law;
	+ The Curriculum Directory and Bishop’s statements on religious education;

and* + Any Diocesan directives relating to schools/colleges.
* To conduct the school in accordance with the Instrument of Government or Articles of Association and in particular its ethos statement;
* To become familiar with, to support and implement the policies and procedures of the Diocese including the Bishop’s policies on education, including religious education, and the directives issued by the Bishops collectively, specifically the Bishops’ memorandum on the Appointment of Teachers in Catholic Schools and to represent those policies and directives to the governing body;
* To consider not only the interests of the individual school, but the interests of other Catholic schools and colleges and the Catholic community as a whole as represented by the Bishop.
* To attend an induction training course before or within twelve months of taking up appointment;
* To participate in relevant training as may be required from time to time; and
* In all actions, to serve as a witness to the Catholic faith.
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| **SECTION 5 – REFERENCES**Please note that the referees you provide should not be related to you. Please provide details of the Parish Priest or priest of the church where you normally worship who can verify your Catholic practice: Name: ……………………………………………………………………………………..Address: …………………………………………………………………………………..……………………………………………………………………………………………...Telephone: ………………………………………………………………………………..Email: ………………………………………………………………………………………Please provide details of a referee who can verify your skills, knowledge and experienceName: ……………………………………………………………………………………..Address: …………………………………………………………………………………..……………………………………………………………………………………………...Telephone: ………………………………………………………………………………..Email: ……………………………………………………………………………………… |

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**NOMINATION AND IDENTITY VERIFICATION FORM FOR THE APPOINTMENT OR RE-APPOINTMENT OF FOUNDATION GOVERNORS**

**TERM OF OFFICE – FOUR YEARS**

The role and responsibilities of Foundation Governors are described in Notes of Guidance. Please refer to this document for details information.

1. **I wish to nominate:**

Name: …………………………………………………………………………………………

Address: …………………………………………………………………………………………

……………………………………………………………………………………………………..

Postcode: ………………………………………… Tel No: ……………………………………

as a Foundation Governor of:

Name of School: ……………………………………………………………………………….

Signed: …………………………………………………………………….(Proposer)

1. I accept the above nomination:

Signed ……………………………………………………………………………. (Nominee)

1. I am pleased to support the above nomination:

Signed: …………………………………………………….……………….……..(Parish Priest)

Date: …………………………………………………………………..

Please complete and return this nomination section and the identity verification section overleaf and return the form as soon as possible to: Heather Watts, Diocese of Lancaster Education Service, The Education Centre, Balmoral Road, Lancaster, LA1 3BT. Thank you.

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**IDENTITY VERIFICATION FORM FOR THE APPOINTMENT OR RE-APPOINTMENT OF FOUNDATION GOVERNORS**

**On behalf of the Bishop and Trustees of the Diocese of Lancaster, I have checked the identity of the person named overleaf.**

**Signed: ……………………………………………………. (Parish Priest/Headteacher)**

**Please print name: …………………………………………………………………………………**

**Date: ………………………………………………………………………..**

**Please indicate form of documentary evidence – original only, please.**

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|  |  | **Birth Certificate** |
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|  |  | **Driving Licence** |
|  |  |  |
|  |  | **Passport** |
|  |  |  |
|  |  | **Marriage Certificate** |
|  |  |  |
|  |  | **A recent payslip or Form P45 or Form P60** |

**Please complete this identity verification section and the nomination section overleaf and return. Thank you.**

**Heather Watts**

**Diocese of Lancaster Education Service**

**The Education Centre**

**Balmoral Road**

**LANCASTER**

**LA1 3BT**