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| Parallel Learning Trust - Governor Application Form | | | | | | |
| Basic information | | | | | | |
| **Title:** | |  | | | | |
| **First name:** | |  | | | | |
| **Surname:** | |  | | | | |
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| Contact details | | | | | | |
| **Address 1:** | |  | | | | |
| **Address 2:** | |  | | | | |
| **Address 3:** | |  | | | | |
| **Town/City:** | |  | | | | |
| **Postcode:** | |  | | | | |
| **Telephone number:** | |  | | | | |
| **Email address:** | |  | | | | |
| **Preferred form of contact:** | |  | | | | |
|  | | | | | | |
| Employment details (if not a staff member) | | | | | | |
| **Occupation:** | |  | | | | |
| **Employer name:** | |  | | | | |
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| Professional body membership (if applicable) | | | | | | |
| **Qualification:** | |  | | | | |
| **Institution:** | |  | | | | |
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| Supporting information and skills (note form or bullet point answers are acceptable) | | | | | | |
| **What are your motivations for joining the Governing Body?** | | | | | | |
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| **What particular skills and experience would you bring to the Governing Body?**  **Why do you think these will make you an effective school governor?** | | | | | | |
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| **Do you have children of school age?** | | | | | **Yes/No** | |
| **Are you currently, or have you previously been, a school governor?** | | | | | **Yes/No** | |
| **If yes, please tell us what type of school** | | | | | **Primary/Secondary** | |
| **What is the minimum number of hours each month you would be able to commit to the role on average?** | | | | | **Less than one hour**  **One to five hours**  **Over five hours** | |
| **Will you be able to attend approximately nine governor meetings each year, typically from 6.00 p.m. to 8.00 p.m.?** | | | | | **Yes/No** | |
| **Do you have easy access to email and the internet?**  **If no, how would you intend receiving relevant documents?** | | | | | **Yes/No** | |
| **Are you able to commit to undertaking necessary training activities such as online computer based modules, events in school and local authority networking events?** | | | | | **Yes/No** | |
| **What, if any, aspect of the role of governor do you have questions about?** | | | | | | |
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| Declaration | | | | | | |
| **I confirm that I have read the extract from The School Governance (Constitution) (England) Regulations 2012 Part (Schedule) 4 Regulation 17 which sets out the circumstances in which a person is qualified for or disqualified from holding or continuing in office as a governor.** *This extract is appended to this application form.* | | | | | | **Yes/No** |
| **I agree to an enhanced DBS check (criminal record check).** | | | | | | **Yes/No** |
|  | | | | | | |
| Signed: |  | | Date: |  | | |