PARENT GOVERNOR ELECTION: NOMINATION FORM

THE ENGLISH MARTYRS CATHOLIC SCHOOL AND SIXTH FORM COLLEGE

This form should be returned to the Headteacher at the school by

28th November 2022

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| I wish to serve as Parent Governor and to be a candidate if an election is necessary. |
| FULL NAME (*TITLE, FORENAME & SURNAME)**BLOCK CAPITALS PLEASE* | ADDRESS, EMAIL ADDRESS, TELEPHONE NUMBER | SIGNATURE AND DATE | NAME OF CHILD *(with CLASS, YEAR GROUP OR TUTOR GROUP)*  |
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**Personal Statement**

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| Please include a brief personal statement (300 words maximum) to support your nomination. Your statement should show how you meet specific skills or experience required by the Local Governing Committee. |

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| *Individuals who are not able to make the following declaration may not serve as Governor. Please answer each question by ticking in the relevant column on the right hand side.*  | **YES** | **NO** |
| Are you aged 16 or over at the date of this election or appointment?  |  |  |
| Are you an employee of any Trust Schools?  |  |  |
| Have you been disqualified from acting as charity trustee (see [table of disqualifying reasons](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/820804/Disqualification_Reasons_Table_v2.odt) if in doubt)? |  |  |
| Have you been removed from serving as a charity trustee, or been stopped from acting in a management position within a charity? |  |  |
| Have you been disqualified from serving as a company director? |  |  |
| Have you been removed as a governor serving a school? |  |  |
| Are included in the list kept by the Secretary State for Education under s1 of the Protection of Children Act 1999 (or equivalent) or have you ever been disqualified from working with children or serving on a governing body of a school? |  |  |
| Are you able to provide a valid Disclosure and Barring Certificate under the Protection of Freedoms Act 2012 which does not disclose any reason why you should be unsuitable to work with children? |  |  |
| You are the parent, or an individual exercising parental responsibility, of a registered pupil at the school?  |  |  |

**GOVERNOR ELIGIBILITY SELF DECLARATION FORM**

I have read the summary of disqualifications as set out above and confirm that I am not disqualified from serving as a governor, and that in the event that I am elected to the Local Governing Committee, I will notify the Clerk to the Governing Body immediately should I become disqualified during my term of office.

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

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

**This form should be returned to the Headteacher School at the school by**

 *28th November 2022*

NOTE: if there are any parts of this form that you cannot answer, cannot sign or which you have questions about, please contact Mrs S Crawshaw scrawshaw@ems.bhcet.org.uk who will be willing to advise you.