**WICKERSLEY PARTNERSHIP TRUST**

Expression of Interest – Governor

***We encourage expressions of interest to become a Governor from people from all walks of life so that we gain a wide variety of skills and experience to support and develop our schools within the Wickersley Partnership Trust.***

**Personal Details:**

|  |  |
| --- | --- |
| Title and Full Name |  |
| Address (including post code) |  |
| Telephone Number ( landline and mobile) |  |
| E-mail Address |  |
| Do you hold an enhanced disclosure and barring check (formerly known as CRB) | Yes / No If yes, please provide: Date of Check: Disclosure Number: |
| Where did you hear about the Governor vacancy? |  |
| **PARENT GOVERNORS**: Please state your child’s / children’s name(s), year group and school. |  |

**Current or Last Employer:**

|  |  |
| --- | --- |
| **Position Held** |  |
| **Name & Address of Employer** |  |
| **Dates employed (eg. from, to)** |  |
| **Reason for leaving** |  |

**References:** Please provide the details of two referees. Please note these people cannot be related to you, your spouse or civil partner. One should be your last or current employer where possible.

|  |  |
| --- | --- |
| **Reference 1** |  |
| **Name** |  |
| **E-mail Address** |  |
| **Postal Address** |  |
| **Telephone Number** |  |
| **Capacity in which they know you** |  |

|  |  |
| --- | --- |
| **Reference 2** |  |
| **Name** |  |
| **E-mail Address** |  |
| **Postal Address** |  |
| **Telephone Number** |  |
| **Capacity in which they know you** |  |

**Skills / Experience Audit:** The Trust needs Governors with a range of skills and experience. Please indicate in the grid below which of the following areas you have skills or experience in.

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Yes/No** |  | **Yes/No** |
| Business |  | IT  |  |
| Governance |  | Leadership /Management |  |
| Communications |  | Legal |  |
| Community / Voluntary Work |  | Marketing |  |
| Education  |  | Procurement |  |
| Finance |  | Research / Evaluation |  |
| Human Resources |  | Working in teams |  |

|  |
| --- |
| **Please give a brief description of the level of experience / skills you have in the areas you have identified above and state how these will support the school.****Please give a brief description of and other community / voluntary work or skills and expertise not listed that you have which would benefit the school.** |
| **Why do you want to become a school Governor?** |

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please return this completed form to: the Governance team via email at: clerk@wickersleypt.org.

**Wickersley Partnership Trust – Governor Declaration Form:**

|  |
| --- |
| **Name:** |
| **Address:** |
| **Postcode:** |
| **Any Previous Names of Aliases: Date of Birth:** |
| **Phone Number: Mobile:** |

|  |  |
| --- | --- |
| **Declaration** | **Please indicate Yes or No** |
| I am aged 18 or over |  |
| Are you currently or have you been a Governor at another establishment? If yes, please provide details. | Details: |
| Have you ever been removed from membership of a Governing Body or Board of Directors (or Charity Trust) for any reason? If yes, please provide details of the establishment and the reason for your removal. | Details: |
| Do you have any criminal convictions? If yes, please provide details. | Details: |
| Is there anything in your personal or professional life that may bring the Wickersley Partnership Trust into disrepute? |  |
| I am not detained or liable to be detained under the Mental Health Act 1983. |  |
| I am not subject to a bankruptcy restrictions order or an interim order under the Company Directors Disqualification Act 1986 or to an order made under section 429(2)(b) of the Insolvency Act 1986. Nor has my estate been sequestrated and the subsequent sequestration has not been discharged, annulled or reduced, in accordance with the Education (Disqualification Provisions: Bankruptcy and Mental Health) Regulations 2006. |  |
| I have not, in the twenty years prior to becoming a Governor, been convicted as aforesaid of any offence and had passed on me a sentence of imprisonment for a period of not less than two and a half years. |  |
| I have not, at any time, had passed on me a sentence of imprisonment for a period of not less than five years. |  |
| I have not been fined, in the five years prior to becoming a Governor, for causing a nuisance or disturbance on education premises. |  |
| I am not subject to a disqualification order under the Criminal Justice and Court Services Act 2000. |  |
| I am not related to any Governor or member of staff of the Trust. |  |

The information on this form is correct and complete to the best of my knowledge and belief.

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

Headteacher: I confirm that I have been shown the necessary evidence to confirm proof of identity and a DBS check has been satisfactorily completed.

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