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| **Application for appointment as a Trustee or Local Governor** |

1. **Personal Details**

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| Surname | |
| Forenames | |
| Previous/other names | |
| Current address | Email |
|  | Mobile |
|  | Home Tel. |
| Postcode |  |

1. **Why are you applying to be a trustee or local governor of SHINE?**

# Criteria to be used when considering your application to become a trustee or local governor.

* A commitment to supporting SHINE’s vision and raising standards of achievement.
* Ability and willingness to work constructively as part of a team in the best interest of SHINE.
* Ability to contribute needed skills and expertise as identified through a skills audit of all trustees and local governors.
* A willingness to fulfil the role of trustee or local governor with energy and enthusiasm and a commitment to preparing for and attending meetings on a regular basis.
* Meeting the relevant statutory eligibility requirements for trustees and local governors as set out in the relevant regulations and undergoing all necessary background checks (for example, an Enhanced DBS check).
* A commitment to promoting and supporting equality of opportunities in line with SHINE’s Equalities Policy.
* A willingness to attend further training as required.
* An undertaking not to behave in any way that would have cause to bring the Trust or its schools into disrepute.

1. **Declarations\***

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| I have read the above criteria and I agree to abide by them if I should be appointed as a trustee or local governor. Furthermore, I certify that the information given in this application is true and accurate and I have disclosed any and all information that may have a bearing on my appointment. I understand that any appointment is subject to an Enhanced DBS Check and further due diligence, including references, may be required. | | | |
| **Signed:** |  | **Date:** |  |

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| **Data Protection Act**: This information is being collected for the purposes of the recruitment and selection procedures. When you complete this document you are providing your consent for SHINE to hold and use personal information for these purposes. The information you provide may also be disclosed to relevant statutory bodies for their purposes. If you have a query or concern regarding this, please contact clerk@shine-mat.com in the first instance. SHINE considers every application regardless of gender, age, disability, sexual orientation, race, religion and belief. The data within this form will be used by the Board to determine your eligibility for the role of trustee or local governor and whether you can bring knowledge, skills or experience which has been identified as a need within the Board or one of its local governing bodies. If we have no suitable vacancies at present, we will retain your application for six months. |

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| **Trustee or Local Governor**  **Declaration form** |

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| Surname |
| Forenames |
| Previous/other names |

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| Is there any reason that you should be disqualified as a trustee or local governor? | Yes / No |
| If Yes, please give details. | |
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| Are you currently a serving trustee or local governor at another school or academy? | Yes / No |
| If Yes, please give details of your role and the name, area and phase of the education. | |
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| Do you have any close personal relationships with any pupil, employee, trustee or local governor of SHINE? | Yes / No |
| If Yes, please give details. | |
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| Does a company you are a director or owner of have a contractual relationship with SHINE? | Yes / No |
| If Yes, please give details of your role and the name company, with an overview of the service provided | |
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| **Are you interested in becoming:** | | | Trustee | | |  | Local governor | | |  | Either | | | |  |
| **Please now also complete the attached trustee/local governor skills audit giving details of the skills, qualifications and experience you could bring to the role.** | | | | | | | | | | | | | | | |
| **Have you been a school governor, academy governor or charity trustee before?** | | | | | | | | | | | | | | | |
| School governor |  | Academy governor | |  | Charity trustee | | |  | | None of these | | | | |  |
| **If you have ticked any of the boxes above, please give the name of the school, academy or charity** | | | | | | | | | | | | | | | |
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| **Do you have children of school age?** (You may be eligible to be a parent governor) | | | | | | | | | Yes | | |  | No |  | |
| **Please give the name(s) of the school / academy they attend** | | | | | | | | | | | | | | | |
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I declare that I am not disqualified from serving as a Trustee and that:

* **I am** aged 18 or over at the date of this election or appointment.
* **I am not** liable to be detained under the mental health act 1983.
* **I am not** bankrupt or subject to a disqualification order under the Company Director’s Disqualification Act 1986 or to an order made under section 429(b) of the Insolvency Act 1986
* **I have not** been removed from the office of a charity trustee or trustee for a charity by an order by the Charity Commissioners or the High Court on the grounds of any misconduct or mismanagement or, under section 7 of the Law Reform (Miscellaneous Provisions) (Scotland) Act 1990, from being concerned in the management or control of any body.
* **I am not** included in the list (Barred List) of teachers and workers with children or young persons whose employment is prohibited or restricted.
* **I am not** disqualified from being the proprietor of an independent school or from being a teacher or other employee in any school.
* **I am not** disqualified from working with children.
* **I have not** in the last five years received a sentence of imprisonment, suspended or otherwise, for a period of not less than three months without the option of a fine.
* **I have not** in the last twenty years been convicted of any offence and had passed on me a sentence of imprisonment of not less than two and a half years.
* **I have not** at any time had passed on me a sentence of imprisonment of not less than five years.
* **I have not** in the last five years, been fined 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 agree to provide proof of identity to the school in the form of an original passport, driving licence or birth certificate from which a copy will be taken for our records.

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| I have read the above statements and certify that the declarations given are true and accurate and I have disclosed any and all information that may have a bearing on my appointment. I understand that any appointment is subject to an Enhanced DBS Check and further due diligence may be required. | |
| **Signed**: | **Date**: |

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| **Safer recruitment and eligibility to serve as a trustee or local governor** | | | |
| **As part of your application to become a trustee or local governor, you need to provide details of at least one referee who knows you well (preferably two). These can either be business or personal references from someone who has known you for at least two years. Please provide at least one method of contact for each referee.** | | | |
| **REFEREE 1** | | | |
| **Name** |  | **Relationship to you** |  |
| **Email** |  | **Telephone number** |  |
| **Contact address including postcode** |  | | |
| **REFEREE 2** | | | |
| **Name** |  | **Relationship to you** |  |
| **Email** |  | **Telephone number** |  |
| **Contact address including postcode** |  | | |

**Skills audit: (separate document)** The Board wants to ensure that there is the right blend of expertise and experience for them and its sub-committees (including Local Governing Bodies) to work effectively. We use the National Governor Association skills audit to inform the Board’s recruitment decisions by identifying which areas of expertise you might bring to the organisation. You do not need to demonstrate competency in each area – please complete either the skills audit for a trustee or local governor (as applicable to the role you feel you can fulfil for SHINE).