



RED KITE LEARNING TRUST GOVERNOR APPLICATION FORM

PLEASE PRINT USING BLACK INK

IN STRICTEST CONFIDENCE

PERSONAL INFORMATION		
Title:	Surname:	Forenames:
Previous Surname/s:		
Home Address:		Postal Address (<i>if different</i>):
Postcode:		Postcode:
Home Tel No:		E-mail Address:
Work Tel No:		National Insurance No:
Mobile Tel No:		Date of Birth: <small>Non discriminatory – required to ensure correct identification</small>
Occupation:		

EQUAL OPPORTUNITIES MONITORING INFORMATION	
Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>	Do you consider yourself to have a disability? Yes <input type="checkbox"/> No <input type="checkbox"/>
Please note: the categories below are taken from the 2001 Census. The Trust is required to use this format for its monitoring exercises. Please choose one section from (a) to (e), then place a cross in the appropriate box to indicate your cultural background.	
(a) White: British <input type="checkbox"/> Irish <input type="checkbox"/> Any other white background <input type="checkbox"/> (please state):	
(b) Mixed: White and Black Caribbean <input type="checkbox"/> White and Black African <input type="checkbox"/> White and Asian <input type="checkbox"/> Any other mixed background <input type="checkbox"/> (please state):	
(c) Asian or Asian British: Indian <input type="checkbox"/> Pakistani <input type="checkbox"/> Bangladeshi <input type="checkbox"/> Any other Asian background <input type="checkbox"/> (please state):	
(d) Black or Black British: Caribbean <input type="checkbox"/> Any other black background (please state):	
(e) Chinese or other Ethnic Group: Chinese <input type="checkbox"/> Any other ethnic group <input type="checkbox"/> (please state):	

PROFESSIONAL BODIES Please list any Institutions or Societies of which you are a member.

INSTITUTE/ SOCIETY	LEVEL OF MEMBERSHIP	MEMBERSHIP No	M'SHIP BY EXAM YES/NO DATE	ENROLMENT DATE	EXPIRY DATE

OTHER INFORMATION

Have you ever been or are you currently a Governor? Yes No

If yes, please give details of the school, type of governor and period of office:

Have you a past or present association with any of our schools? Yes No

If yes, please give details:

Do you or will you have a child attending any of our schools?

If yes please indicate the name of the school or schools

Please give details of any other work or voluntary work with children and young people you may have completed:

Please outline below your reasons for applying.

EXPERIENCE AND PERSONAL SKILLS

Please indicate the relevant personal and professional skills along with experience you have which would assist you in the role as a governor, to contribute to the effective governance and success of the school:

Please tick all that apply ✓	
Strategic Leadership <input type="checkbox"/>	Human Resources <input type="checkbox"/>
Setting organisational culture, values and ethos <input type="checkbox"/>	Experience of external accountability <input type="checkbox"/>
Decision making <input type="checkbox"/>	Building an effective team <input type="checkbox"/>
Collaborative working with key stakeholders <input type="checkbox"/>	Working within statutory and contractual requirements <input type="checkbox"/>
Risk Management <input type="checkbox"/>	Self-review and evaluation <input type="checkbox"/>
Analysis of data <input type="checkbox"/>	Managing and developing teams <input type="checkbox"/>
Financial management and monitoring <input type="checkbox"/>	Legal knowledge <input type="checkbox"/>
Procurement and contracting <input type="checkbox"/>	Community engagement <input type="checkbox"/>
Marketing/PR <input type="checkbox"/>	Governance <input type="checkbox"/>
Education <input type="checkbox"/>	Health and Safety <input type="checkbox"/>
Premises Management <input type="checkbox"/>	Project Management <input type="checkbox"/>
	Other <input type="checkbox"/>

Details of any relevant qualifications or training that you have completed:

REFERENCES

Please provide contact details for two referees. These can be business or personal references.

Name:	Name:
Job Title:	Job Title:
Address:	Address:
Postcode:	Postcode:
Tel No:	Tel No:
E-mail:	E-mail:
Relationship to you:	Relationship to you:

Do you hold an Enhanced Disclosure and Barring Service Disclosure Certificate? (please tick)
(previously known as Criminal Records Bureau (CRB))

Yes

No

If you have ticked yes, please provide;

DBS/CRB Disclosure Certificate Number

Date of Issue

If you have ticked Yes, an original copy will be requested for verification.

DISQUALIFICATION CRITERIA

A person is disqualified from being a Governor or Associate Member if the following apply:

- Is under the age of 18 at the time of their election or appointment;
- The person is a registered pupil at the school;
- Is already a Governor at the same school;
- Has failed to attend the Governing Board meetings for a continuous period of six months;
- Is subject to a bankruptcy restriction order, an interim bankruptcy restriction order, a debt relief order or an interim debt relief order
- Has had their estate sequestrated and the sequestration order has not been discharged, annulled or reduced
- Is subject to:
 - A disqualification order or disqualification undertaking under the Company Directors Disqualification Act 1986
 - A disqualification order under Part 2 of the Companies (Northern Ireland) Order 1989,
 - A disqualification undertaking accepted under the Company Directors Disqualification (Northern Ireland) Order 2002
 - An order made under Section 492(2)(b) of the Insolvency Act 1986 (failure to pay under a county court administration order)
 - Has been removed from the office of charity trustee or trustee for a charity by the Charity Commissioners or High Court on grounds of any misconduct or mismanagement, or under Section 34 of the Charities and Trustees Investment (Scotland) Act 2005 from participating in the management or control of any body
 - Is included in the list of people considered by the Secretary of State as unsuitable to work with children
 - Is disqualified from working with children or subject to a direction under Section 142 of the Education Act 2002
 - Is disqualified from registration for child minding or providing day care
 - Is disqualified from registration under Part 3 of the Childcare Act 2006
 - Has received a sentence of imprisonment (whether suspended or not) for a period of not less than three months (without the option of a fine) in the five years before becoming a governor or since becoming a governor
 - Has received a prison sentence of two-and-a-half years or more in the 20 years before becoming a governor
 - Has at any time received a prison sentence of five years or more
- Have been fined for causing a nuisance or disturbance on school premises during the five years prior to or since appointment or election as a Governor;
- Refuses to allow an application to the Disclosure and Barring Service (DBS) for a criminal records check
- Brings the Trust or school into disrepute or compromises their own integrity as ambassadors for the Trust and the school in communications, either personal or professional: this includes comments made on social networking sites

Rehabilitation of Offenders Act Disclosure of Previous Convictions

This governor position is exempt from the **Rehabilitation of Offenders Act 1974**.

However, amendments to the Exceptions Order 1975 (2013 & 2020) provide that certain spent convictions and cautions are 'protected'. These are not subject to disclosure to the Trust and cannot be taken into account. Guidance and criteria on the filtering of these cautions and convictions can be found on the Ministry of Justice website or see [here](#).

Shortlisted candidates will be asked to provide details of all unspent convictions and those that would not be filtered, prior to the date of the interview. You may be asked for further information about your criminal history during the recruitment process. If your application is successful, this self-disclosure information will be checked against information from the Disclosure & Barring Service before your appointment is confirmed.

DECLARATION

I have read the summary of regulations above and confirm that I am not disqualified from serving as a governor and that in the event that I am appointed to a governing body, I will notify the clerk to the governing body immediately should I become disqualified during my term of office. I understand that it is an offence to serve as a school governor whilst disqualified.

I agree to the information given on this form being recorded and used by Red Kite Learning Trust and the school at which I will be governor in accordance with the GDPR and the Data Protection Act and confirm that it is correct and complete to the best of my knowledge and belief.

Signed:

Date:

Thank you for completing this application.

Please return your completed application to Catie Bradbury by e-mailing it to bradburyc@rkt.co.uk or posting it, marked 'Confidential' to:

Red Kite Learning Trust, C/O Harrogate Grammar School, Arthurs Avenue, Harrogate, HG2 0DZ