

Nomination Form for Parent Governor Position

Kennel Lane School

(Please complete electronically or in black/blue pen and block capitals)

Mr / Mrs / Miss / Ms / Other:

Address:

.....

.....

Home Number:

Mobile Number:

Email:

(Please indicate your preferred method of contact with an *)

Do you have or do you look after a child currently attending Kennel Lane School: Y/N

Child(ren) Name(s):

Child(ren) Class(s):

Do you work for or provide services under contract to Kennel Lane School: Y/N

(If you are paid to work at the school for more than 500hrs in one 12month period or you are an elected member of the Local Authority, you cannot stand as a parent governor)

I wish to stand for election as a Parent Governor of the above named school.

The following parent at the school supports my nomination:

Mr / Mrs / Miss / Ms / Other:

Parent/carer of:

Child(ren) Name and Class:

Email address: *

** The parent who nominates your application will be contacted to confirm their support.*

Please return your form to Fiona Stanton, Returning Officer:

THE VALUE YOU CAN ADD AS A GOVERNOR

Why do you want to become a school governor? Please outline your reasons for showing an interest in becoming a school governor – including details of personal qualities, experience or skills you feel you could bring to a school governing body. Please continue on a separate sheet if necessary.

Please indicate below any particular skills or experience that you possess in the categories listed.

Marketing	
Strategic Planning	
Finance/ accounting	
Problem solving	

Legal	
Languages	
Project Management	
Human Resources	

IT	
Health and Safety	
Teaching	
Other educational fields	

Science and Technology	
Special Needs	
Sports	
Management	

DISQUALIFICATION RULES

A person is disqualified from holding or from continuing to hold office as a governor or associate member if he or she:

- is detained under the Mental Health Act 1983 during their period of office;
- fails to attend the governing body meetings – without the consent of the governing body – for a continuous period of six months, beginning with the date of the first meeting missed (not applicable to ex-officio governors);
- is subject to a bankruptcy restriction order or an interim 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 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 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 anybody;
- 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 childminding 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 2.5 years or more in the 20 years before becoming a governor;
- has at any time received a prison sentence of five years or more;
- has 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.

I confirm that the information provided on this form is true and accurate

Signature: _____ Date: _____