**FORM PD/SD (2015)**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **Applicant's details** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ***Title*** | ***Mr*** | |  | ***Mrs*** | |  | ***Ms*** | |  | ***Other*** | |  |  |  |  |  |  |  | |  | |  | |  | |  | |  | |
| ***Surname*** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  | |  | |  | |  | |  | |
| ***Forename(s)*** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  | |  | |  | |  | |  | |
| ***Details of any previous name(s) including maiden name(s) and / alias(es)*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ***Surname*** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  | |  | |  | |  | |  | |
| ***Forename(s)*** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  | |  | |  | |  | |  | |
| ***Surname*** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  | |  | |  | |  | |  | |
| ***Forename(s)*** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  | |  | |  | |  | |  | |
| ***Current address*** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  | |  | |  | |  | |  | |
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| ***Town/City*** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  | |  | |  | |  | |  | |
| ***County*** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  | |  | |  | |  | |  | |
| ***Postcode*** |  |  |  |  |  |  |  |  | ***At current address since*** | | | | | M | M | Y | Y | Y | | Y | | ***(month and year)*** | | | | | | | |
| ***Date of birth*** | D | D | M | M | Y | Y | Y | Y | ***Male*** | | |  | ***Female*** | | |  |  | | |  | |  | |  | |  | |  | |
| ***DFE Teacher reference number*** |  |  |  |  |  |  |  |  |
| ***Home telephone number*** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | |  | |  | |  | |  | |  | |  |
| ***Work telephone number*** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | |  | |  | |  | |  | |  | |  |
| ***Preferred contact number and time*** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  | |  | |  | |  | |  | |  | |

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| **Details of governor position** | | | | | | | | | | | | | | | | | | | | | | | |
| ***Applicant to be a governor at*** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | ***School/College*** | | | | |
| ***Category of Governor*** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**ALL relevant sections on BOTH sides of this form MUST be completed before you will be given a term of office as a school governor.**

**When you have completed the form, please return it to:**

*<< name of school>>*

*<< where/how to return it to>>*

**SCHOOL GOVERNOR ELIGIBILITY SELF DECLARATION**

|  |  |  |
| --- | --- | --- |
| *Please answer each question by ticking in the relevant column on the right hand side* | **YES** | **NO** |
| **Are you** aged 18 or over at the date of this election or appointment? |  |  |
| **Have you** been disqualified as a governor at this school for failing to attend governing body meetings for a continuous period of six months, beginning with the date of the first meeting missed, without the consent of the governing body? *Note: This does not apply to Headteachers* |  |  |
| **Has your** estate been sequestrated (temporarily repossessed) and the sequestration not been discharged, annulled or reduced? |  |  |
| **Are you** the subject of a bankruptcy restrictions order or an interim order: debt relief restrictions order or interim order? |  |  |
| **Are you** subject to: a disqualification order or disqualification undertaking under the Company Directors Act 1986; a disqualification order under the Companies (Northern Ireland) Order 2002; a disqualification undertaking accepted under the Company Directors Disqualification (Northern Ireland) Order 2002 or an order made under Section 492(2)(b) of the Insolvency Act 1986 (failure to pay under a County Court administration order)? |  |  |
| **Have you** been removed from the office of a trustee for a charity by an order made by the Charity Commission or Commissioners or the High Court on the grounds of any misconduct or mismanagement in the administration of the charity for which you were responsible or to which you were privy or to which you contributed or to which you facilitated by your conduct? |  |  |
| **Have you** been removed, under section 34 of the Charities and Trustee Investment (Scotland) Act 2005, from being concerned in the management or control of any body? |  |  |
| **Are you** included in the list of teachers or workers considered by the Secretary of State as unsuitable to work with children) or young people? |  |  |
| **Are you** subject to a direction of the Secretary of State under section 128 of the Education and Skills Act 2008? |  |  |
| **Are you** barred from any regulated activity relating to children? |  |  |
| **Are you** disqualified from working with children or from registering for child-minding or providing day care? |  |  |
| **Are you** disqualified from being an independent school proprietor, teacher or employee by the Secretary of State? |  |  |
| **Have you**, in the five years prior to becoming a governor, or since becoming a governor been sentenced to three months or more in prison (whether suspended or not) without the option of a fine? |  |  |
| **Have you**, in the twenty years prior to becoming a governor, received a prison sentence of two and a half years or more? |  |  |
| **Have you**, at any time, received a prison sentence of five years or more? |  |  |
| **Have you** been fined, in the five years prior to becoming a governor or since becoming a governor, for causing a nuisance or disturbance on school or education premises? |  |  |
| **Have you** refused a request by the clerk to make an application to the Criminal Records Bureau for a criminal records certificate? |  |  |

**I declare that I am not disqualified from serving as a school governor**.

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

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

**NOTE: if there are any parts of this form that you cannot sign or which you have questions about, please contact *<< school contact>>* who will be willing to advise you.**