



The Association of Muslim Governors

'Encouraging Muslim Participation in State Schools'

APPLICATION FORM FOR GOVERNOR VOLUNTEERS

Boxes marked with a * must be completed

PERSONAL DETAILS (PLEASE COMPLETE THIS SECTION IN CAPITAL LETTERS)

*Title: *Surname:

*First Names: *Any Previous Names:

*Date of Birth: *Occupation: *Male *Female

*Home Address (including Post Code):

*Work Address (including Post Code):

*Telephone No:

*E-mail:

*Mobile No:

*Telephone No:

*E-mail:

* Please tick preferred form of contact: Telephone E-mail Mobile By Post

Please tick the sector you work in: Private Public Voluntary Civil Service

For office use only

Date received:

Forwarded to:

School details:

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.

* **Have you been a school governor before?** (Please tick one box) Yes No

* **Please select 5 skills from this list and rank from 1 to 5, with 5 as the highest**

Marketing	<input type="checkbox"/>	Legal Knowledge	<input type="checkbox"/>	Team Working	<input type="checkbox"/>	Science and Technology	<input type="checkbox"/>
Strategic Planning	<input type="checkbox"/>	Languages	<input type="checkbox"/>	Decision Making	<input type="checkbox"/>	Engineering	<input type="checkbox"/>
Finance	<input type="checkbox"/>	Art and Design	<input type="checkbox"/>	IT	<input type="checkbox"/>	School Improvement Experience	<input type="checkbox"/>
Problem Solving	<input type="checkbox"/>	Experience as a Parent/Carer	<input type="checkbox"/>	Communications	<input type="checkbox"/>		
Human Resources	<input type="checkbox"/>	Project Management	<input type="checkbox"/>	Health & Safety	<input type="checkbox"/>		

You are obliged to provide details of at least one referee, and ideally two. These can be business or personal and will have known you for at least two years. Please include name, address and email address if possible.

*Referee 1:

Referee 2:

YOUR PREFERENCES FOR LOCATION AND SCHOOL

*Preferred location. Please specify one town, area or borough.

It is not always possible to place volunteers at schools in their preferred location. AMG will use your preference as a guide but if you tick the "Yes" box it is possible your application may be sent to an area where you might be placed more quickly.

*Are you willing for us to pass your application to an alternative area? Yes No

*Date from which you are available to serve as a Governor. ASAP Month Year

*Type of school No preference Nursery Primary Secondary
 Please tick one box
 Please note that stating a preference does not guarantee the school type of your choice will have immediate vacancies.

If you have children of school age, you are eligible to be a parent governor at any school. If this applies to you, please tick the box.

If you are interested in vacancies in schools for children with Special Educational Needs, please tick the box.

We are often asked for volunteers to be interviewed (by media or for research purposes) or to supply case studies. Please indicate whether or not you are happy to be contacted for this. Yes No

HOW YOU FOUND OUT ABOUT OUR SERVICES

Please could you let us know how you found out about our service by ticking or completing the relevant box.

AMG Presentation/Stand	<input type="checkbox"/>	AMG Website	<input type="checkbox"/>	Do-it.org	<input type="checkbox"/>
AMG Poster	<input type="checkbox"/>	Taxi Advert	<input type="checkbox"/>	Bus Advert	<input type="checkbox"/>
Newspaper Article	<input type="checkbox"/>	Flier through Door	<input type="checkbox"/>	A5 Leaflet	<input type="checkbox"/>
Magazine Advert	<input type="checkbox"/>	Reach	<input type="checkbox"/>		
Other	<input type="checkbox"/>	(Please specify) <input type="text"/>			

In-Company/Membership Communications

If you heard of AMG through In-Company/Membership Organisation communication, can you please let us know:

(i) The name of the company or organisation

(ii) How you found out about our services within your organisation (please tick the relevant box)

Intranet	<input type="checkbox"/>	Newsletter/magazine	<input type="checkbox"/>	Notice board	<input type="checkbox"/>
E-mail	<input type="checkbox"/>	Mailshot	<input type="checkbox"/>	Mentioned in a meeting	<input type="checkbox"/>

FURTHER INFORMATION

Do you consider yourself to have a disability, as defined in the Disability Discrimination Act 1995?

Yes No

Please give details of any special needs provision you would require (e.g. wheelchair access/ help for dyslexia)

It would help us understand community representation if you could tell us about your ethnic background (Please tick the appropriate box)

White:	<input type="checkbox"/> British	Asian or Asian British:	<input type="checkbox"/> Indian	Chinese or other ethnic group:	<input type="checkbox"/>
	<input type="checkbox"/> Irish		<input type="checkbox"/> Pakistani		
	<input type="checkbox"/> Other		<input type="checkbox"/> Bangladeshi		
			<input type="checkbox"/> Any other Asian background	<input type="checkbox"/> Chinese	
Mixed:	<input type="checkbox"/> White and Black Caribbean	Black or Black British:	<input type="checkbox"/> Caribbean	<input type="checkbox"/> Any other	
	<input type="checkbox"/> White and Black African		<input type="checkbox"/> African		
	<input type="checkbox"/> White and Asian		<input type="checkbox"/> Any other Black background		
	<input type="checkbox"/> Any other mixed background				

Who can serve as a School Governor?

Under The School Governance (Constitution) (England) Regulations 2003 a governor must:

- Be aged 18 or over at the time of his/her election or appointment. Pupils may be governors but few are likely to be eligible;
- Not hold more than one governorship at the same school;
- Not be detained under the Mental Health Act 1983;
- Not be bankrupt;
- Not be 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, or an order made under section 492(2)(b) of the Insolvency Act 1986 (failure to pay under county court administration order);
- Not have been removed from the office of trustee for a charity by the Charity Commissioners or High Court on grounds of any misconduct or mismanagement, or removed under Section 7 of the Law Reform (Miscellaneous Provisions) (Scotland) Act 1990 from being concerned in the management or control of any body;
- Not to be disqualified from working with children;
- Not be included in the list of teachers or workers prohibited or restricted from working with children or young people;
- Not be disqualified from being an independent school proprietor, teacher or employee by the Secretary of State;
- Not have been sentenced to 3 months or more in prison (without the option of a fine) in the 5 years before becoming a governor;
- Not have received a prison sentence of 2.5 years or more in the 20 years before becoming a governor;
- Not have at any time received a prison sentence of 5 years or more;
- Not have been fined for causing a nuisance or disturbance on school premises during the 5 years prior to or since appointment or election as a governor;
- Not be appointed clerk to the governing body;
- Submit to any request by the clerk to the governing body to make an application under section 113 of the Police Act 1997 for a criminal records certificate.

Please note that checks by the Criminal Records Bureau are carried out to ascertain whether you are ineligible to serve on the governing body of a school because either:

- You are disqualified from working with children by Section 35 of the Criminal Justice and Court Services Act 2000; or
- You contravene one of the conditions imposed in the school governance regulations.

Please sign below to confirm that you are not disqualified from serving as a school governor and that the information you give on this form can be recorded and used by AMG in accordance with the DPA. The data on this form will be shared with local authorities and schools.

* Signature:

Date:

Please send the completed and signed form to:

Address: The Association of Muslim Governors
P.O. Box 1940, Ilford, Essex IG1 3XN

Phone: 0845-652-4016

E-mail: info@muslimgovernors.org

Website: www.muslimgovernors.org