



CONFIDENTIAL
GOVERNOR APPLICATION FORM

Leeds College of Building
North Street,
Leeds LS2 7QT
Telephone: 0113 2226000
Fax: 0113 2226001
Email: krolinson@lcb.ac.uk
Website: www.lcb.ac.uk

1. PERSONAL DETAILS

Title Mr Mrs Miss Ms

Surname Forenames

Address for Correspondence:

Post Code:

Home Tel No. Mobile No.

Work Tel Email Address

2. GOVERNOR EXPERIENCE

Are you currently or have you previously been a school or college Governor? Yes No

If yes please state experience:

3. QUALIFICATIONS (please state highest / most relevant)

Name of School, College, University etc.	Qualification/Level	Subject	Grade

4. PRESENT OR MOST RECENT EMPLOYMENT

Job Title: Date Appointed:

Employer: Date Left (if applicable):

Address:

5. SUPPORTING INFORMATION & SKILLS

5a) Why would you like to become a governor at Leeds College of Building (maximum of 200 words)?

Please indicate whether you feel you have extensive, moderate, basic or no skills, knowledge or experience against the following headings):

Generic Skills, Knowledge and Experience	Extensive / moderate / basic / None	Specialist Knowledge	Extensive / moderate / basic / None
Governance		College Improvement	
Strategic Planning		Financial Management	
Self Evaluation		Audit	
Data Analysis		Ofsted	
Staff Recruitment		Premises/facility management	
Performance Management		Human Resources	
Community Relations		Law	
Chairing meetings		ICT	
Leadership		PR and Marketing	
Coaching/Mentoring		Children's Services	
Negotiating/mediating		Safeguarding	
Communication		Health services	
Complaints/grievance/appeals		Project management	
Decision making		Health and Safety	
Challenging procedures		Construction	
Monitoring decisions / outcomes / performance		English and Maths	
Commercial		Procurement / purchasing	

5b) Why do you think your skills and experience will make you an effective College Governor (maximum 100 words)?

6. REFERENCE

Name:	Organisation:
Address:	Email Address:
	Tel. No:

7. ADJUSTMENTS

Are there any adjustments that need to be made for the purpose of:

a) The Governor Role	
b) The interview	

8. CRIMINAL RECORD CHECK

HAVING A CRIMINAL RECORD WILL NOT NECESSARILY PREVENT YOU FROM BEING A GOVERNOR AT LEEDS COLLEGE OF BUILDING.

2(a) Do you have any cautions (including any final warnings or reprimands) or convictions which are not "protected" as defined by the Exceptions Order 1975* to the Rehabilitation of Offenders Act 1974? Yes No

2(b) Are there any other matters that may be relevant to your suitability to be a Governor at the College (There is no obligation to disclose a protected caution or conviction as defined by the Exceptions Order 1975* or any circumstances ancillary to that protected caution or conviction.) Yes No

*As amended by the 2013 Exceptions Order

If either answer is yes, please give the details below:

Date	Nature Of Summons/ Charge/ Caution	Court	Sentence or Order

9. DECLARATION & SUBMISSION

Leeds College of Building is committed to safeguarding and promoting the welfare of children, young people and vulnerable adults and expects all governors, staff and volunteers to share this commitment. Signature of this application form indicates that you can comply with the requirements of being a Governor at Leeds College of Building. You also certify that the information that you have given on this application form is accurate and you understand that any false information may result in you not being eligible to be a Governor at Leeds College of Building. Submission of this form by e-mail constitutes certification of accurate information.

Signature: _____ Date: _____

Completed application forms should be returned by email to krolinson@lcb.ac.uk or by post to the Clerk to the Corporation & Governance Advisor, Leeds College of Building, North Street, Leeds LS2 7QT

Data Protection: Please note that the details you provide on this application form will be entered onto the College computer system. Information provided is subject to the Data Protection Act 2018. If you are successful in your Governor application, you will need to undertake a check by the Disclosure & Barring Service (DBS)

TO BE COMPLETED AT APPOINTMENT & INDUCTION STAGE

Surname	Forenames
----------------	------------------

EQUALITY & DIVERSITY

The Leeds College of Building is an Equality and Diversity Employer. It has an Equality and Diversity policy which means that all Governor applicants with the College will receive equal treatment irrespective of their age, gender, marital status, disability, sexuality or race. A copy of the policy can be obtained by contacting the College HR Unit or can be downloaded from the College website. To ensure the effectiveness of the policy and to assist in its development, you are requested, to complete the section below which will be treated as confidential.

Please tick where appropriate.

(a) Gender:	Male <input type="checkbox"/>	Female <input type="checkbox"/>	(b) DATE OF BIRTH:						
(c) Age Range:	16-19 <input type="checkbox"/>	20-29 <input type="checkbox"/>	30-39 <input type="checkbox"/>	40-49 <input type="checkbox"/>	50-59 <input type="checkbox"/>	60+ <input type="checkbox"/>			

(d) How would you describe your ethnic origin?

<input type="checkbox"/> Bangladeshi	<input type="checkbox"/> Indian	<input type="checkbox"/> Mixed White & Asian
<input type="checkbox"/> Black African	<input type="checkbox"/> Pakistani	<input type="checkbox"/> Mixed White & Black African
<input type="checkbox"/> Black Caribbean	<input type="checkbox"/> Other Asian	<input type="checkbox"/> Mixed White & Black Caribbean
<input type="checkbox"/> Black Other	<input type="checkbox"/> White British	<input type="checkbox"/> Mixed – other
<input type="checkbox"/> Chinese	<input type="checkbox"/> White Irish	<input type="checkbox"/> Prefer not to say
<input type="checkbox"/> Other	<input type="checkbox"/> White Any other background	

(e) What is your religion/belief?

<input type="checkbox"/> Baha'i	<input type="checkbox"/> Buddhism	<input type="checkbox"/> Christianity	<input type="checkbox"/> No Religion or belief
<input type="checkbox"/> Hinduism	<input type="checkbox"/> Islam (Muslim)	<input type="checkbox"/> Jainism	
<input type="checkbox"/> Judaism	<input type="checkbox"/> Rastafarianism	<input type="checkbox"/> Sikhism	
<input type="checkbox"/> Zoroastrians (Parsi)	<input type="checkbox"/> Prefer not to say	<input type="checkbox"/> Other	

(f) What is your sexual orientation?

<input type="checkbox"/> Bisexual	<input type="checkbox"/> Gay man	<input type="checkbox"/> Gay woman/lesbian
<input type="checkbox"/> Heterosexual/straight	<input type="checkbox"/> Other	<input type="checkbox"/> Prefer not to say

(g) The Equality Act 2010 defines a disabled person as one who has a physical or mental impairment which has a substantial and long term adverse effect on his/her abilities to carry out normal day to day activities.

Do you have a disability: YES (if yes, please complete (h) overleaf) NO

(h) Do you have any health problems and/or need additional facilities to help you in the role of Governor? If so, please indicate below:

I may need help because of:

Dyslexia	<input type="checkbox"/>	Mental Health	<input type="checkbox"/>	Heart Disease	<input type="checkbox"/>
Dyscalculia	<input type="checkbox"/>	Disability affecting Mobility	<input type="checkbox"/>	Blind/ Visual Impairment – not corrected by glasses	<input type="checkbox"/>
Autism	<input type="checkbox"/>	Deaf/Hearing Impairment	<input type="checkbox"/>	Ability to lift, carry move everyday objects	<input type="checkbox"/>
ADHD/ ADD	<input type="checkbox"/>	Diabetes	<input type="checkbox"/>	Other (<i>please state</i>)	<input type="checkbox"/>
Speech	<input type="checkbox"/>	Epilepsy	<input type="checkbox"/>		

By ticking this box I am consenting to the information relating to my disability or learning difficulty to be disclosed to the appropriate individuals within the College to ensure that reasonable arrangements are in place to meet my specific needs.