

**APPLICATION FOR APPOINTMENT TO THE BOARD OF THE CORPORATION**

**– GOVERNOR OR CO-OPTED EXTERNAL MEMBER APPOINTMENT**

Before completing this form please read the Guidance Notes carefully.

This form may be photocopied when it reaches the College and it would therefore be helpful if you could please complete it electronically or in black ink.

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| **PERSONAL DETAILS** | | |
| **Title** |  | |
| **Surname** |  | |
| **First Name** |  | |
| **Home Address** |  | |
| **Telephone Number** |  | |
| **Mobile Phone Number** |  | |
| **Email address** |  | |
| **Address for correspondence**  *(if different from above)* |  | |
| **How many years have you lived locally?** | |  |
| **What is your present profession /occupation?**  *If retired please state ‘Retired’, followed by your former profession/occupation.* | |  |

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| **Please describe briefly why you wish to become a Governor at East Riding College, having regard to the key qualities a Governor must possess (good character, understanding and communication, social awareness, maturity and sound temperament, sound judgement, commitment and reliability) and any experience you have which may be relevant.** *Please continue on a separate sheet and attach, if necessary.* | |
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| **Have you visited the College?** |  |
| **If so, when?** |  |
| **If you have ever been a member of a college governing body or made a previous application to be a member of the Corporation of East Riding College, please give details.** | |
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| **Please give the name of any relative, including spouse, partner and their close**  **relatives, who are Members of the Corporation or employees of East Riding College.** *Please include details of past serving Governors and/or employees since 1993 giving details of their position held, dates of office or employment where possible.* | |
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| **Are you an employee or a student at East Riding College? If ‘Yes’ please give details.** | |
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| **SKILLS** |
| This section of the application form has been designed to capture information about you and your experience that will assist the Search, Governance & Development Committee in matching your skills and expertise with the current skills base of the governing body. |
| Please give details below of any work-related, professional or academic qualifications, and when and where they were obtained: |
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**Please tick the following boxes which best reflect your abilities and experience in each area:**

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| --- | --- | --- | --- |
| **1 =** | High-level/expert knowledge or experience | **2 =** | Good knowledge or experience |
| **3 =** | Reasonable/Working knowledge or experience | **4 =** | Minimal/no knowledge or experience |

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| **1** | **Do you have any knowledge and experience of:** | **Grade 1 - 4** |
|  | **Strategy/management** |  |
| 1.1 | Strategic planning at board or senior level |  |
| 1.2 | Working in a commercial environment at a level which includes planning responsibilities |  |
| 1.3 | Chairing a board or committee |  |
| *1.4* | *Leadership of organisational change/strategic change management* |  |
| *1.5* | *Strategic decision making* |  |
| *1.6* | *Stakeholder and reputation management* |  |
| *1.7* | *Governance and accountability frameworks* |  |
| *1.8* | *Contributing to board effectiveness* |  |
| **2** | **Quality** |  |
| 2.1 | Developing a quality strategy |  |
| 2.2 | Monitoring performance & the achievement of planned outcomes/i*mprovements* |  |
| 2.3 | Inspection by an external regulatory body e.g. OFSTED etc or some other regulatory body |  |
| **3** | **Resources and solvency** |  |
| 3.1 | Accountancy and financial matters |  |
| 3.2 | Developing financial and strategic planning for an organisation |  |
| 3.3 | Educational and public funding |  |
| 3.4 | Audit matters |  |
| 3.5 | Estates and property matters |  |
| 3.6 | *Strategic* risk management |  |
| **4** | **Pay and conditions** |  |
| 4.1 | Working with human resource issues at management level |  |
| 4.2 | Working with Trade Unions |  |
| 4.3 | Health and safety matters |  |
| **5** | **Education** |  |
| 5.1 | Working with young people between the ages of 16 and 19 years |  |
| 5.2 | Working with learner over the age of 19 either in an educational or training environment |  |
| 5.3 | Safeguarding of young persons and vulnerable adults |  |
| 5.4 | Implementing equality and diversity policies and good practice |  |
| 5.5 | Higher Education |  |
| **6** | **Community** |  |
| 6.1 | Working with local community organisations |  |
| 6.2 | Knowledge and understanding of local, regional or national authorities at management level or as an elected member |  |
| 6.3 | Knowledge and understanding of minority communities |  |
| 6.4 | The training needs of employers |  |
| **7** | **Wider experience/skills** |  |
| 7.1 | Information and communication technology (ICT) |  |
| 7.2 | Manufacturing |  |
| 7.3 | Marketing/PR |  |
| 7.4 | Media/arts |  |
| 7.5 | Health/Pharmacy/Science |  |
| 7.6 | Retail |  |
| 7.7 | Schools |  |
| 7.8 | Magistrate |  |
| 7.9 | The Law. Please state any field of legal expertise you have: |  |
| 7.10 | Any other area of expertise or knowledge you feel pertinent that is not listed: |  |

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| **Please indicate any voluntary/community role you are associated and provide details below** | | | | | |
| Community groups and associations | |  | | | |
| Community languages | |  | | | |
| Campaign Group for Disability or Health Issue | |  | | | |
| Faith work, Church or other religious group | |  | | | |
| School or College Governor | |  | | | |
| HE / University Governor | |  | | | |
| Local Elected Councillor | |  | | | |
| Magistrate | |  | | | |
| Offenders / Ex-Offenders | |  | | | |
| Refugees / Asylum Seekers | |  | | | |
| Arts / Theatre | |  | | | |
| Youth Work | |  | | | |
| Trade Union | |  | | | |
| Member of Parliament | |  | | | |
| Other (please specify) | |  | | | |
| **DECLARED INTRESTS, CONVICTIONS AND ANY CIVIL MATTERS** | | | | | |
| Does your employer (or ‘you’ if self-employed or former employer if you are ‘retired’) have any current or intended contractual arrangements with the College for the supply of goods and/or services that you are aware of? If so, please give details of the nature of the contract(s) and the value(s). | | | | | |
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| **Please give details of any criminal convictions that you have, whether spent or not** **under the Rehabilitation of Offenders Act 1974. (Please note that it is standard procedure for all Governors, and applicants, to complete a request for disclosure with the Disclosure and Barring Service).**  *Please continue on a separate sheet and attach, if necessary.* | | | | | |
| Offence | | Penalty or Order of the Court | | Court | Date of Conviction |
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| **Please give details of any criminal or civil proceedings in which you are, or expect to** **be, a party.** | | | | | |
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| **Please give details of any police cautions to which you have been subject.** | | | | | |
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| **Have you ever been declared bankrupt on, or entered into a voluntary arrangement** **with creditors? If ’Yes’ please give details.** | | | | | |
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| **Have you ever been a director of a company which has been placed into liquidation or administration? If ’Yes’ please give details.** | | | | | |
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| **A person who is disqualified from acting as a charity trustee by virtue of the Charities Act may not be a member; that is if any of the following offences and circumstances apply:**   1. Unspent conviction for an offence involving dishonesty or deception; 2. Being a person who has been removed from a relevant office; 3. Unspent conviction for specified terrorism, money laundering or bribery offences; 4. Unspent conviction for contravening a Charity Commission Order or Direction; 5. Unspent conviction for misconduct in public office, perjury or perverting the course of justice; 6. Unspent conviction for attempting, aiding or abetting any of the above offences; 7. Disobeying a Charity Commission Order; 8. Being on the sex offenders register; 9. Unspent sanction for contempt of Court; or 10. Being a designated persons under specific anti-terrorist legislation.   Please confirm **none of the above apply** by ticking the box. □  If ‘yes’ please give details. | | | | | |
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| **Are you a member of any organisation whose aims and objectives are not consistent with the College's duty to promote good race relations and to oppose all forms of discrimination? If ’Yes’ please give details.** | | | | | |
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| **REFERENCES** | |
| Please give details of two people who are prepared to provide a written reference in support of your application. It is expected that a referee should have known you for at least three years. If employed, one reference should be your employer. No more than one referee may be a serving Corporation member. | |
| **Referee 1** | |
| **Title** | *Please indicate*: Mr Mrs Miss Ms Dr Other (*specify*) |
| **Name** |  |
| **Address** |  |
| **Email Address (if we may use such address)** |  |
| **Telephone Number** |  |
| **Occupation** |  |

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| **Referee 2** | |
| **Title** | *Please indicate*: Mr Mrs Miss Ms Dr Other (*specify*) |
| **Name** |  |
| **Address** |  |
| **Email Address (if we may use such address)** |  |
| **Telephone Number** |  |
| **Occupation** |  |

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| **DECLARATIONS** |
| *Please mark either* ***Yes*** *or* ***No****. You may be asked this question again, if you are called for an interview.*  Is there anything in your private or working life, or in your past, or to your knowledge in that of any member of your family or close friends, which, if it became generally known, might bring you or the College into disrepute, or call into question your integrity, authority or standing as a member of the Corporation?  **YES NO** |
| I have read the Guidance Notes. I wish you to consider my application for membership of East Riding College Further Education Corporation and confirm that I do not contravene any of the ineligibility criteria set out in the extract from the Instrument & Articles of Government provided in the Guidance Notes.  If appointed, I will be able to commit to the required attendance, carry out my fair share of duties described in the Guidance Notes and undertake the required training. The information, which I have given, is true and complete to the best of my knowledge and belief.  Signed :  Date :  (Please complete signature in block capitals if the form is being completed electronically) |

This application will be treated in strict confidence and in line with the attached privacy notice.

The completed application form should be emailed to:

[janice.sunderland@eastridingcollege.ac.uk](mailto:janice.sunderland@eastridingcollege.ac.uk)

Or posted to:

Clerk to the Corporation

East Riding College

Flemingate Centre

Armstrong Way

BEVERLEY

HU17 0GH

If you have any queries with your application or you require an application form or any of the supporting information in an alternative format, please do not hesitate to contact:

Janice Sunderland, Clerk to the Corporation

Tel: 01482 390709

Email: [janice.sunderland@eastridingcollege.ac.uk](mailto:janice.sunderland@eastridingcollege.ac.uk)

East Riding College, Flemingate Centre, Armstrong Way, Beverley, HU17 0GH

**Equality and Diversity Monitoring Form**

**Why are we asking you for this information?**

At East Riding College we are committed to promoting the health and well-being of our Governors and Co-opted External Members and to ensuring all are well supported during their time with us. This information will help us to do this and to understand more about the diversity of those applying to be Governors and Co-opted External Members. It will also enable Governors to set clear targets which promote the interests and opportunities of under-represented groups. We want to ensure that no one is disadvantaged when applying or carrying out their duties as a Governor or Co-opted External Members.

All information will be kept strictly confidential by the Clerk to the Corporation. It will be separately stored from the record of applicants who successfully become Governors and Co- opted External Members. The data will be collected together anonymously to provide overall numbers of people who are in the various categories. The questions follow protected characteristics under the Equalities Act 2010 and use census definitions where appropriate.

**This sheet will be separated from your application form and the information it contains will not be used for shortlisting or at any other stage of the selection process.**

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| The aim of this section is to collect personal information in order to allow the College’s Equality Policy to operate effectively. Answers to these questions are voluntary. | | | | | | | | | | | | | | | | | | | | |
| **Date of Birth:** | |  | | | | | | | | | | | | | | | | | | |
| **Age:** | Under 25 |  | 25-34 | |  | 35-44 |  | 45-54 | |  | 55-64 |  | | | 65+ | | | |  | |
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| **Disability** | | | | | | | | | | | | | | | | | | | | |
| This information is required to monitor equal opportunities issues in the Further Education sector and supports the College’s Equality Policy. (Please tick the box that applies) | | | | | | | | | | | | | | | | | | | | |
| No Known Disability | | | | | | | | | | | | | | | | |  | | | |
| Two or more impairments and/or disabling medical conditions | | | | | | | | | | | | | | | | |  | | | |
| A specific learning difficulty such as dyslexia, dyspraxia or AD(H)D | | | | | | | | | | | | | | | | |  | | | |
| General learning disability (such as Down’s syndrome) | | | | | | | | | | | | | | | | |  | | | |
| A social/communication impairment such as Asperger’s syndrome/other autistic spectrum disorder | | | | | | | | | | | | | | | | |  | | | |
| A long standing illness or health condition such as cancer, HIV, diabetes, chronic heart disease, or epilepsy | | | | | | | | | | | | | | | | |  | | | |
| A mental health condition, such as depression, schizophrenia or anxiety disorder | | | | | | | | | | | | | | | | |  | | | |
| A physical impairment or mobility issues, such as difficulty using arms or using a wheelchair or crutches | | | | | | | | | | | | | | | | |  | | | |
| Deaf or serious hearing impairment | | | | | | | | | | | | | | | | |  | | | |
| Blind or a serious visual impairment uncorrected by glasses | | | | | | | | | | | | | | | | |  | | | |
| Prefer not to say | | | | | | | | | | | | | | | | |  | | | |
| A disability, impairment or medical condition that is not listed above:  (Please Specify) | | | | | | | | | | | | | | | | |  | | | |

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| **Cultural and Ethnic Origin** | | | | |
| This information is required to monitor the distribution of ethnic groups and supports the College’s Equality Policy. Please show which group best describes your ethnic origin or descent by ticking one of the following: | | | | |
| Any Other | |  | Mixed – Any Other |  |
| Asian/Asian British – Any Other | |  | Mixed – White & Asian |  |
| Asian/Asian British – Bangladeshi | |  | Mixed – White & Black African |  |
| Asian/Asian British – Indian | |  | Mixed – White & Black Caribbean |  |
| Asian/Asian British – Pakistani | |  | White – Any Other |  |
| Black/Black British – African | |  | White – British |  |
| Black/Black British – Any Other | |  | White – Irish |  |
| Black/Black British – Caribbean | |  | White – Other European |  |
| Chinese | |  | Prefer not to say |  |
| Please State your Nationality: |  | | | |

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| **Religion and Belief** | | | | | | | | | | | |
| This information is required to monitor equal opportunities issues and supports the College’s Equality Policy. Please tick one of the following to show your religion: | | | | | | | | | | | |
| No Religion | |  | | | Jewish | | |  | Spiritual | |  |
| Buddhist | |  | | | Muslim | | |  | Hindu | |  |
| Christian | |  | | | Sikh | | |  | Prefer not to say | |  |
| Any Other religion of belief | | | | | |  | |  | | | |
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| **Sex** | | | What is your legal sex, i.e. the sex given on your birth certificate?  (Please tick the box that applies) | | | | | | | | |
| Male |  | | | Female | | |  | | Prefer not to say |  | |
| **Gender identity** | | | Do you live in a gender different to the one given at birth? | | | | | | | | |
| Yes |  | | | No | | |  | | Prefer not to say |  | |
| **Sexual Orientation** | | | Please tick one of the following to show your sexual orientation: | | | | | | | | |
| Bisexual | |  | | | Gay Woman/Lesbian | | |  | Other | |  |
| Gay Man | |  | | | Heterosexual | | |  | Prefer not to say | |  |

**PRIVACY NOTICE – VACANCY APPLICANTS**

Thank you for applying for a Governor role at East Riding College.  To process your application we will require certain data about you.  This data comes directly from you on your application form.

We are committed to ensuring that the information we collect and process is secure. In order to prevent unauthorised access or disclosure, we have put in place suitable physical, electronic and managerial procedures to safeguard and secure the information we collect.

Your data will be handled and stored securely in both hard and electronic forms primarily with the Clerk to the Corporation but will also be shared with other members of the interview panel to enable them to identify appropriate candidates to be called for interview.

The College does not use your personal data for the purposes of automated decision making or profiling.

If your application is unsuccessful, we will securely destroy your personal data 6 months after the interview date.

We neither sell your personal data to third parties nor disclose it to them for the purpose of direct marketing.

You have the right to withdraw your consent at any time to the processing of relevant data. You also have the right to lodge a complaint about the processing of your personal data with the Information Commissioners Office.

We have notified the Office of the Information Commissioner of our data processing activities: our Data Protection Notification number is Z6977440.

**Please tick in the box below** to indicate your consent to the collection and use of your personal data.

By ticking this box I confirm that I consent to East Riding College processing my personal data for the purposes of identifying my suitability to be considered for employment at the College in the role for which I am applying.