

# Application for School Governors

## Department of Education representatives for nursery, primary, secondary, grammar or special schools

- Completion of this form puts you under no obligation to become a school governor if offered the opportunity, nor does it guarantee that any opportunity will be offered.
- Please write clearly using black ink and tick boxes where required.

1. **PERSONAL DETAILS** - Title: *(please delete as appropriate)* Dr/Mr/Mrs/Miss/Ms Male  Female

Surname: \_\_\_\_\_ Forename(s): \_\_\_\_\_  
*(Use CAPITAL letters)*

Date of birth  or age range 18-29  30-39  40-49  50-59  60-69  70+

Home Address: \_\_\_\_\_ Daytime Address *(if different)*: \_\_\_\_\_

\_\_\_\_\_ Postcode: \_\_\_\_\_ \_\_\_\_\_ Postcode: \_\_\_\_\_

Telephone/Mobile No: \_\_\_\_\_ Telephone/Mobile: No: \_\_\_\_\_

Email address: \_\_\_\_\_

Occupation *(If retired or not currently working, please indicate your previous occupation and employment details):*

\_\_\_\_\_

Are you currently, or have you ever been, a member of a school Board of Governors? Yes  No

If 'Yes', please give details:

Name & address of school	Start date	End date
_____	_____	_____
_____	_____	_____

### 2. TYPE OF SCHOOL

The duties and responsibilities of a Board of Governors are common to all schools. However, if you have a particular interest in a specific type (or types) of school please complete the relevant box (or boxes) in order of preference (1 being most desirable, etc). *You do not have to complete all the boxes.*

Nursery  Primary  Secondary  Grammar  Special

### 3. MANAGEMENT TYPE

Please indicate if you have any preference for a particular school management type. Complete the relevant box/es in order of preference (1 being most desirable, etc). *You do not have to complete all the boxes.*

No Preference  Integrated Schools  Irish-Medium Schools

Schools under Catholic management  Schools under other management  
(includes Controlled Schools)

**4. LOCALITY**

Please indicate the locality in which you are prepared to serve.

It would be helpful if you could also indicate the appropriate postcode(s) (using the outward segment of the postcode only, ie BT19). If you have difficulty finding the correct postcode you can call the Postcode Enquiry Line on (084) 5711 1222.

BT  BT  BT

**5. PREFERRED SCHOOL(S)**

It will not always be possible to allocate candidates to preferred schools but if you have a particular interest in a specific school (or schools) we will try to take this into consideration. If this is the case please complete this section including your reason for choosing the particular school.

School Name: \_\_\_\_\_ School Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
Postcode: \_\_\_\_\_ Postcode: \_\_\_\_\_  
Reason: \_\_\_\_\_ Reason: \_\_\_\_\_

Will you have a child/children attending this/these school/s from Sept 2009-2013? Yes  No

If 'Yes', please state age/s of child/children or year of class: \_\_\_\_\_

Are you currently teaching in either of these schools? Yes  No

Have you ever taught in either of these schools? Yes  No

**6. EXPERIENCE**

Please indicate if you have any of the following skills or experience

Financial management  Accountancy  Law  HR or Personnel management   
Recruitment  Business management  Education

It is important that you supply below details of any other skills or experience you consider you would bring to a Board of Governors including any personal qualities that you consider would be valuable to the effective management of a school. (Continue on a separate page if necessary or attach a CV).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**7. OBJECTIONS**

Have you any objections to the Department passing your name to other nominating bodies, eg Education & Library Board, Council for Catholic Maintained Schools? Yes  No

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

- Thank you for the interest you have shown. Please return this form by to:  
**School Governance Team, Department of Education, Rathgael House,  
43 Balloo Road, Bangor, Co Down, BT19 7PR.**