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| |  | | --- | | **CONFIDENTIAL**    **Application for membership of Education Appeals Panels** | |  |

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| **1. PERSONAL DETAILS (please complete in block letters)** | | | | | | | | | | | |
| Surname: | | |  | | | | Forenames: | | |  | |
| Title by which you wish to be referred: (Mr/Mrs/Miss/Ms/Other) | | |  | | | | Date of Birth: | | |  | |
| Address for Correspondence: | | |  | | | | Permanent Address  (if different): | | |  | |
| Postcode: | | |  | | | | Postcode: | | |  | |
| Home telephone no: | | |  | | | | Mobile telephone no: | | |  | |
| Work telephone no: | | |  | | | | Email address: | | |  | |
| **2. EMPLOYMENT HISTORY** | | | | | | | | | | | |
| (Starting with the most recent first please give details of your employment history including any voluntary work). | | | | | | | | | | | |
| Employer name & address | | | | Dates | | | Position held and responsibilities | | | | |
|  | | | | From | | To |  | | | | |
|  | | | |  | |  |  | | | | |
| **3. RELEVANT SKILLS AND EXPERIENCE** | | | | | | | | | | |
| Please say what skills, experience and qualities you would bring to the work of the Appeal Panels. They can be drawn from any aspect of your life | | | | | | | | | | |
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| **4. REASONS FOR APPLYING TO SERVE ON SCHOOL APPEAL PANELS** | | | | | | | | | | |
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| How did you find out about becoming an Appeal Panel member? | | | | | | | | | | |
| **5. REFEREES** | | | | | | | | | | |
| Please provide details of two referees (not related to you) who have consented to be approached now in relation to your application. | | | | | | | | | | |
| Name (Referee 1): |  | | | | Name (Referee 2): | | |  | | |
| Organisation (if appropriate): |  | | | | Organisation (if appropriate): | | |  | | |
| Address: |  | | | | Address: | | |  | | |
| Postcode: |  | | | | Postcode: | | |  | | |
| Telephone No: |  | | | | Telephone No: | | |  | | |
| Email address: |  | | | | Email address: | | |  | | |
| **6. DISCLOSURE OF CRIMINAL BACKGROUND** | | | | | | | | | | |
| The post for which you are applying does not require a Disclosure & Barring Service check, but you are still required to answer the following questions. You do NOT need to disclose convictions which under the Rehabilitation of Offenders Act 1974 are considered as 'spent.' For further information please visit www.gov.uk  Please answer the following questions. | | | | | | | | | | |
| Have you ever been convicted of a criminal offence? | | | | | YES  NO | | | | | |
| Have you ever been cautioned for a criminal charge? | | | | | YES  NO | | | | | |
| Are you at present the subject of a criminal charge? | | | | | YES  NO | | | | | |
| If YES to any of the above questions, please give brief details including dates. | | | | | | | | | | |
| **7. GENERAL QUESTIONS**  **Please answer ALL questions as fully as possible** | | | | | | | | | | |
| Are you, or have you ever been, an employee of Nottinghamshire County Council? | | | | | | | | | YES / NO | |
| If YES, please give details of the nature of your employment and the dates involved. | | | | | | | | | | |
| Have you ever been a County Councillor? | | | | | | | | | YES / NO | |
| If YES, please give details. | | | | | | | | | | |
| Are you, or have you ever been a school governor? | | | | | | | | | YES / NO | |
| If YES, please give details of which school(s) and dates. | | | | | | | | | | |
| Have you ever worked in a school in any capacity (eg as a teacher, other type of employee or as a volunteer)? | | | | | | | | | YES / NO | |
| If YES, please state in what capacity and the dates involved. | | | | | | | | | | |
| Do you have children or grandchildren who attend or have attended school in Nottinghamshire or the City of Nottingham? | | | | | | | | | YES / NO | |
| If YES, please give details. | | | | | | | | | | |
| Do you have a partner or close relative who   * is a County Councillor or employee of the County Council? * is a school governor? * has children at a Nottinghamshire or City of Nottingham school? | | | | | | | | | YES / NO  YES / NO  YES / NO | |
| If YES to any of the above 3 statements, please give details. | | | | | | | | | | |
| Have you had at any time, any connection with the County Council or any school which might reasonably be taken to raise doubts about your ability to act impartially? | | | | | | | | | YES / NO | |
| If YES, please give brief details | | | | | | | | | | |
| Are you available for meetings   * during working hours? * in the evening? | | | | | | | | | YES / NO  YES / NO | |
| Are there any particular days or times when you are not available? Please give details. | | | | | | | | | | |
| Do you drive and have regular use of a vehicle? | | | | | | | | | YES / NO | |
| **8. EQUALITY ACT 2010** | | | | | | | | | | |
| The Equalities Act 2010 states a person has a disability if they have a physical or mental impairment which has a long-term and substantial adverse effect on their ability to carry out normal day-to-day activities.   If you would like to declare any disability, please tick the appropriate box below.  Do you consider yourself to be disabled? YES  NO  If you feel that any reasonable adjustments should be taken to help you participate as an appeal panel member, please give details here. | | | | | | | | | | |
| **9. DATA PROTECTION ACT** | | | | | | | | | | |
| The personal information collected on this form will be processed on computer to manage your application. If successful, your personal information will be retained while you serve as a panel member. It will not ordinarily be disclosed to anyone outside the Council without first seeking your permission, unless there is a statutory reason for doing so. For further information visit: www.informationcommissioner.gov.uk or contact the Council's Corporate Data Protection Officer on 0115 9773504. | | | | | | | | | | |
| **10. DECLARATION** | | | | | | | | | | |
| If you return your application form to us by email and you are subsequently invited to interview, you will be required to sign a printed copy of your form.  I declare that, to the best of my knowledge and belief, the information given on ALL parts of this form is correct to the best of my knowledge, and that I wish to be considered for appointment as a member of Nottinghamshire County Council’s Education Appeal Panels. | | | | | | | | | | |
| Signed | | | | | Date | | | | | |
| **Please return your completed form by e-mail to:** education.appeals@nottscc.gov.uk  **Or post to:**  Education Appeals,  Chief Executive’s Department  County Hall  West Bridgford  Nottingham  NG2 7QP | | | | | | | | | | |
| **If you have any queries about completing the form, please contact:** | | | | | | | | | | |
|  | |  | | | | | | | | |
| **Peter Astbury** | | **0115 977 3141** | | | | | | | | |
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