



**EDUCATION DEPARTMENT
BROADWAY HOUSE
322 HIGH STREET, STRATFORD
LONDON E15 1AJ**

**Tel No: 020 8430 5016
Fax No: 020 8430 3594**

Application Form to become a Newham School Governor

SECTION 1: PERSONAL DETAILS

SURNAME:	
OTHER NAME (S):	TITLE: MISS \ MS \ MRS \ MR
CORRESPONDENCE ADDRESS:	
POST CODE:	
HOME TEL.NO.	WORK TEL. NO.
Email:	MOBILE:

SECTION 2: FURTHER INFORMATION

Explain why you are interested in becoming a School Governor. Please include details of any relevant skills and experience you have gained inside and outside paid work, community work, voluntary work etc. (The attached notes for guidance will help you in completing this Section.)

<p>(Continue on a separate sheet if necessary)</p>
--

Please Turn Over

SECTION 3: DISABILITY

Please note this information is optional.

Newham wants to improve the opportunities it offers to disabled people to enable them to play a full and active part on governing bodies	
Do you consider yourself to be a disabled person?	YES / NO
Facilities Required e.g. ramped/level access, British Sign Language Interpreter, large print/tape/Braille documents, induction loop etc.	

SECTION 4: PERSONAL PREFERENCE

If you have a preference, please state the name of the school governing body you are interested in.	
---	--

SECTION 5: DECLARATION

I have read the guidance notes headed 'Are you eligible to become a School Governor?' and I declare that I am eligible.

Signature of Applicant: _____ Dated: _____

<p>Completed form should be returned to:</p> <p>Governing Bodies Support Section Education Department Broadway House 322 High Street London E15 1AJ</p> <p>FAX: 020 8430 3594 Email: irfan.mustafa@newham.gov.uk</p>
--