**Diverse Leaders for Tomorrow Programme**

**Application Form**

|  |  |  |
| --- | --- | --- |
| **Applicant Details** | | |
| Name |  | |
| Current role (indicate TLR level) |  | |
| School & Phase |  | |
| Address |  | |
| Email |  | |
| Mobile |  | |
| Payment (please indicate) | *Double-click on the box and ‘check’ the box*  I’m paying for this programme myself by BACs or Cheque  My school have agreed to pay for this programme and should be invoiced | |
| **Application Questions** (to be completed by applicant) | | |
| Please describe your current leadership responsibilities.  What are your strengths in terms of your leadership skills and abilities |  | |
| What next stage promotion do you aspire to?  When do you hope to achieve this? |  | |
| How do you think that this Diverse Leaders for Tomorrow Programme will help you to achieve your goal? |  | |
| Has your Headteacher completed the second part of this form? | | Yes  No |
| Has your Headteacher agreed to release you from school for all parts of the programme? | | Yes  No |

I have read the information regarding the Diverse Leaders Programme and I am fully aware of the commitment required. I agree to participate in all parts of the programme.

**Applicant: By completing this form you are agreeing to the statements above.**

**Signed: Date:**

**Your signature is required, if you do not have an electronic signature, please print this form, sign it and then scan it to be emailed to info@sharonwarmington.com**

**Please submit fully completed application by 30/10/15**

**Submit application to:** [**info@sharonwarmington.com**](mailto:info@sharonwarmington.com)**Diverse Leaders for Tomorrow Programme**

**Application Form**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Current Headteacher’s Reference and Endorsement** | | | | | |
| Name of Headteacher |  | | | | |
| School and Address |  | | | | |
| Email Address |  | | | | |
| Telephone |  | | | | |
| Name of applicant |  | | | | |
| Payment (please indicate) | *Double-click on the box and ‘check’ the box*  The applicant is paying for this programme by BACs or Cheque  I agree to the school being invoiced for this programme  Purchase Order Ref to be used: | | | | |
| How far does the applicant meet the following criteria? (1= Outstanding 2 = Very Good 3 = Satisfactory 4 = Poor) | | | | | |
|  | **1** | **2** | **3** | **4** | **Comment (if applicable)** |
| Relationship with staff | ☐ | ☐ | ☐ | ☐ |  |
| Relationship with students | ☐ | ☐ | ☐ | ☐ |  |
| Current leadership abilities | ☐ | ☐ | ☐ | ☐ |  |
| Ability to inspire teams | ☐ | ☐ | ☐ | ☐ |  |
| Ability to work as part of a team | ☐ | ☐ | ☐ | ☐ |  |
| Experience of working with SLT | ☐ | ☐ | ☐ | ☐ |  |
| Initiative | ☐ | ☐ | ☐ | ☐ |  |
| Quality of professional judgement | ☐ | ☐ | ☐ | ☐ |  |
| Contribution to wider aspects of school life | ☐ | ☐ | ☐ | ☐ |  |
| Commitment to own professional development | ☐ | ☐ | ☐ | ☐ |  |
| Honesty & integrity | ☐ | ☐ | ☐ | ☐ |  |
| Adaptability | ☐ | ☐ | ☐ | ☐ |  |
| Communication skills | ☐ | ☐ | ☐ | ☐ |  |
| Contribution to wider aspects of school life and ethos | ☐ | ☐ | ☐ | ☐ |  |
| Potential for further promotion | ☐ | ☐ | ☐ | ☐ |  |

I have read the information regarding the Diverse Leaders Programme and I am fully aware of the commitment required by the applicant and their Headteacher.

I fully support this application and I agree to release the applicant (named above) from school so that they are available to complete all parts of the programme.

**Headteacher: By completing this form you are agreeing to the statements above**

**Signed: Date:**

**Your signature is required, if you do not have an electronic signature, please print this form, sign it and then scan it to be emailed to info@sharonwarmington.com**

**Please submit fully completed application by 30/10/15**

**Equal Opportunities Monitoring Form**

Any information provided on this form will be treated as strictly confidential and will be used for statistical purposes only. No information will be published or used in any way, which allows any individual to be identified.

**Gender** Male 🗆 Female 🗆

**Are you married or in a civil partnership** Yes 🗆 No 🗆

**Age** 16-24🗆 25-29 🗆 30-34 🗆 35-39🗆 40-44 🗆 45-49 🗆 50-54 🗆55-59 🗆 60-64 🗆 65+ 🗆

Prefer not to say 🗆

**How would you describe your national identity?**

English 🗆 Welsh 🗆 Scottish 🗆 Northern Irish 🗆

British 🗆 Other 🗆 Prefer not to say 🗆

**What is your ethnicity?**

Ethnic origin categories are not about nationality, place of birth or citizenship. They are about the group to which you as an individual perceive you belong. Please indicate your ethnic origin by ticking the appropriate box

***White***

English 🗆 Welsh 🗆 Scottish 🗆 Northern Irish 🗆

Irish 🗆 Gypsy or Irish Traveller 🗆 Other White background 🗆

***Mixed/multiple ethnic groups***

White and Black Caribbean 🗆 White and Black African 🗆

White and Asian 🗆 Any other mixed background 🗆

***Asian/Asian British***

Indian 🗆 Pakistani 🗆

Bangladeshi 🗆 Chinese 🗆

Any other Asian background 🗆

***Black/ African/ Caribbean/ Black British***

African 🗆 Caribbean 🗆

Any other Black/African/Caribbean 🗆

***Other ethnic group***

Arab 🗆 Any other ethnic group 🗆

***Prefer not to say***  🗆

**Do you consider yourself to be disabled?** Yes🗆 No 🗆 Prefer not to say 🗆