

«Title» «FirstName» «LastName»  
«Address1»  
«Address2»  
«Address3»  
«City»  
«PostalCode»

27 November 2007

Dear «FirstName»

The Governor Support and Development Service is constantly seeking ways of improving the services we offer to governors to make them more focused on both individual and whole Governing Body needs. In recent months we have been working closely with the Education Scrutiny Committee, which is made up of elected Members and governor representatives. It's role is to focus on the work of the Local Authority in all areas of education to ensure the provision of improved services within the City.

In regard to Governing Bodies, the remit of this particular exercise is to encourage and improve their level of community involvement and maximise their diversity and skills.

Your help in providing the information requested by Education Scrutiny Committee is crucial to the process. The enclosed survey is designed to gather as much relevant data as possible and we are also taking this opportunity to check with you that the information held on our service database is accurate and up-to-date.

I very much value the input of Education Scrutiny Committee in this exercise and greatly appreciate the time you will spend in completing the survey. Later in the process we will be asking governing bodies as a whole for collective feedback on their role in promoting community cohesion. It is envisaged that this will go out to chairs of governors shortly.

Please return your completed survey in the freepost envelope provided to reach us by 4th February 2008.

With many thanks and best wishes.

Yours sincerely

Sue Pagliaro  
Manager, Governor Support & Development Service

**Questions For Survey of Individual School Governors**

1. Name.....
2. What is your gender? Male / Female In what year were you born? .....
3. What office do you hold within your governing body?

Chair Person	<input type="checkbox"/>	Special Needs	<input type="checkbox"/>
Chair	<input type="checkbox"/>	Child Protection	<input type="checkbox"/>
Numeracy	<input type="checkbox"/>	Racial Equality	<input type="checkbox"/>
Literacy	<input type="checkbox"/>	Health & Safety	<input type="checkbox"/>
Subject Link – please state which subject .....	<input type="checkbox"/>	Other – please give name of office .....	<input type="checkbox"/>

**Skills & Training**

4. From the list below, please select what you consider to be your strongest skills (please tick all relevant boxes)

Marketing	<input type="checkbox"/>	Project Management	<input type="checkbox"/>
Strategic Planning	<input type="checkbox"/>	Team Working	<input type="checkbox"/>
Financial Planning	<input type="checkbox"/>	Decision Making	<input type="checkbox"/>
Problem Solving	<input type="checkbox"/>	IT	<input type="checkbox"/>
Personnel	<input type="checkbox"/>	Communications	<input type="checkbox"/>
Legal Knowledge	<input type="checkbox"/>	Health & Safety	<input type="checkbox"/>

Other – please give details:.....  
 .....

5. Do you attend Core Training Sessions ? Yes / No
6. Does Core Training provide all of your training needs? Yes / No
- 6a. If not, what improvements could we make?.....  
 .....  
 .....

7. What form of training do you prefer?
 

Whole Governor Body Training	<input type="checkbox"/>
Distance Learning	<input type="checkbox"/>
On-line Training	<input type="checkbox"/>
Other – please specify.....	<input type="checkbox"/>
.....	

8. What additional training do you need to support you in your role as a Governor?  
 .....  
 .....

**Personal Requirements**

9. The Disability Discrimination Act 1995 says that someone has a disability if they have a ‘physical or mental impairment which has a substantial and long term adverse effect on his/her ability to carry out normal day-to-day activities’.

Do you consider yourself to have a disability? Yes / No

9a. If yes, please give details of any special needs provision you require to fulfil your role as governor (e.g. wheelchair access or audio loop facilities)

.....  
 .....

**Governing Body Diversity**

10. To help us understand community representation, please tell us about your ethnic background

**Asian or Asian British**

- Indian
- Pakistani
- Bangladeshi
- Any other Asian background

**White**

- British
- Irish
- Other please specify .....

**Black or Black British**

- Caribbean
- African
- Any other Black background

**Mixed**

- White & Black Caribbean
- White & Black African
- White & Asian
- Any other mixed background

**Chinese or other ethnic group**

- Chinese
- Any other – please specify.....

11. Do you feel the ethnic balance on your governing body reflects the ethnic balance:

- a) amongst the pupils at your school Yes / No
- b) within the community local to your school Yes / No

**For Local Authority Governors only**

12. To help towards the proportionality of LA seats we need to know if you have any political affiliation; i.e. are you actively involved with a political group (e.g. a party member, canvasser etc)?

If yes, please tick your party below; if not, tick ‘no affiliation’

- Liberal Democrat       Labour       Conservative       Green
- Independent       Other – please specify .....
- No affiliation       .....