



Please attach a recent photograph

(Required by the Healthcare Commission)

TRUSTEE APPLICATION FORM

This form may be typed, or hand printed in **black ink**.

After completing, please return it with a covering letter to **Paul Cookson, Company Secretary, at the above address.**

All information will be treated in the strictest confidence.

PERSONAL DETAILS:

Surname:	Title (Dr, Mr, Mrs, Ms, Miss, or other):
Forenames:	Date of Birth:
Home Address:	Alternative Address:
.....
.....
.....
.....
Postcode:	Postcode:
Home Tel. No.:	Alternative Tel. No:
E-mail Address:

EDUCATION:

Professional, or other Qualifications (with Date of Awarding Body):

.....

EMPLOYMENT:

Present Employment Position / Occupation (Paid or unpaid):

.....

Previous Employment Positions:

.....

.....

.....

Not Applicable (please give reason, i.e. retired):

.....

PREVIOUS EMPLOYMENT DETAILS (Paid or unpaid):

PLEASE GIVE DETAILS OF ANY VOLUNTARY SECTOR EXPERIENCE:

PLEASE GIVE DETAILS OF ANY OTHER INTERESTS:

SUPPORTING INFORMATION:

Please give the reasons for your interest in becoming an Eden Valley Hospice Trustee:

REFERENCES:

Please give the names, addresses, and occupation of 2 referees who can give relevant information regarding your experience and qualification for this appointment.

A reference is normally sought when the applicant has been called for interview.

TITLE:

TITLE:

NAME:

NAME:

ADDRESS:

ADDRESS:

POST CODE:

POST CODE:

OCCUPATION:

OCCUPATION:

EMAIL:

EMAIL:

TEL. NO:

TEL. NO:

FAX NO:

FAX NO:

REHABILITATION OF OFFENDERS ACT 1974:

Because of the nature of the work for which you are applying, the post is exempt from the provisions of Section 4(2) of the Rehabilitation of Offenders Act 1974 (Exemptions) Order 1975. You **must** therefore declare any previous convictions, "spent", or otherwise. Should you be appointed and a failure to disclose a conviction / police caution, or bind over is discovered; it could result in summary removal from post. Any information given will be confidential and will be considered only in relation to the duties of the post; it should be noted that a criminal record is not necessarily a bar to obtaining a position.

Have you ever been convicted of a criminal offence in the UK, or any other country?

Please ✓: **YES:** **NO:**

If yes, please give details on a separate sheet of any offences and penalties, including length of sentence and dates.

Signature:

Date:

Name (please print):

DECLARATION:

I DECLARE that the information that I have given in support of my application, is, to the best of my knowledge and belief, true and complete. I understand that if it is subsequently discovered that any statement is false, or misleading, or that I have withheld relevant information on criminal convictions, or fitness to practice, my application may be disqualified, or, if I have already been appointed, I may be required to stand down. I also understand that my appointment will be subject to satisfactory references and disclosure check, via the Criminal Records Bureau.

I confirm that I am not disqualified from being a Trustee by reason of having been convicted of an unspent, indictable offence; being an undischarged Bankrupt, having made a composition with creditors and being discharged from it; having been removed from Office by the Courts, or the Commission; or being disqualified as a Company Director:

If I am appointed as a Trustee, I agree to undertake and abide by the requirements of Trustees, including the issues published in the "Summaries of Trustee Responsibilities" issued by the Charities Commission.

Signature:

Date:

Name (please print):

DATA PROTECTION ACT:

I, the undersigned, give Eden Valley Hospice the consent to process the information provided on this form in accordance with the Data Protection Act 1998.

Signature:

Date:

FOR INTERNAL OFFICE USE ONLY:

Application received:	Reference Request 1: Out:	Back:
Interview Letter sent:	Reference Request 2: Out:	Back:
Interview Attendance confirmed:	CRB Check initiated:	
Unsuccessful Interview:	Disclosure approved:	
Tentative Offer of Post:	Confirmation of Offer:	

SHORTLIST AND SELECTION:

Has the Application Form been assessed against the Shortlist Criteria? Yes? <input type="checkbox"/> No? <input type="checkbox"/>	If "No", please give reason why?
Has the applicant been shortlisted? Yes? <input type="checkbox"/> No? <input type="checkbox"/>	If "No", please give reason why?
Was the applicant successful at interview? Yes? <input type="checkbox"/> No? <input type="checkbox"/>	If "No", please give reason why?

BOARD MEETING:

Date of Meeting:	If "No", please give reason why?
Proposed by:	
Seconded by:	
Agreed Unanimously? Yes? <input type="checkbox"/> No? <input type="checkbox"/>	