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# TRUSTEE APPLICATION FORM

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| **Advertisement seen in** | | | |  | | | | | |
| **Personal Details** | | | | | | | | | |
| **Title (Mr, Mrs, Miss, Ms/** delete as applicable**)** | | | | **Surname (Family name)** | | | | | **First (or other) name(s)** |
|  | | | |  | | | | |  |
| **Address** | | | | | | | | | |
|  | | | | | | | | | |
| **Email** |  | | | | | | | | |
| **Home Tel** |  | | | | | | | | |
| **Mobile** |  | | | | | | | | |
| **Which method of contact is your preferred option?** *(\* please confirm)* | | | | | | | | | |
|  | | | | | | | | | |
| **Educational, Technical & Professional Qualifications**  (please provide details of all qualifications below, if necessary, please continue on a separate sheet) | | | | | | | | | |
| *Place of study/professional body* | | | | | *Attainment level/results* | | | | |
|  | | | | |  | | | | |
| **Personal Development** (including any courses, membership, voluntary work or responsibilities you consider relevant with outcomes where applicable, if necessary, please continue on a separate sheet) | | | | | | | | | |
| *Provider* | | | | | | *Type of development* | | | |
|  | | | | | |  | | | |
| **Relevant Experience (voluntary and paid)**  Please give details of all relevant posts held since leaving full-time education  (if necessary, please continue on a separate sheet) | | | | | | | | | |
| **Present or Last Employer /or most recent engagement (voluntary or paid)** - *Please provide name and address* | | | | | | | | | |
|  | | | | | | | | | |
| Dates | | To |  | | | | From |  | |
| Position(s) held | |  | | | | | | | |
| Brief description of duties and key achievements | | | | | | | | | |
|  | | | | | | | | | |
|  | | | | | | | | | |
| **Previous Employer /engagements** - *Please provide name and address* | | | | | | | | | |
|  | | | | | | | | | |
| Dates | | To |  | | | | From |  | |
| Position(s) held | |  | | | | | | | |
| Brief description of duties and key achievements | | | | | | | | | |
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| **Personal Statement.**  **INTEREST AND EXPERIENCE**  Please provide a personal statement explaining your interest and experience in mental health and, why you are interested in being part of Havering Mind’s governance (using no more than 500 words).  **SKILLS AND EXPERIENCE**  Please tell us about your **personal qualities**, **skills**, **experience** and **knowledge**. We would like to hear how you meet the criteria of the trustee role and competencies listed in the person specification in the candidate pack (using no more than 1000 words). The information you provide will be used in the selection screening process.  You may provide a brief CV, providing an overview of your employment or volunteering history. | | | | |
|  | | | | |
| References Please name two persons that Havering Mind can obtain a character or work reference from. Ideally, one of the persons should be your present or most recent employer- or similar if the role was not in paid employer (education, volunteering etc.) | | | | |
| **Name:** | | **Name:** | | |
|  | |  | | |
| **Address:** | | **Address:** | | |
|  | |  | | |
| **Tel. No:** | | **Tel No:** | | |
| **Email:** | | **Email:** | | |
| **Occupation:** | | **Occupation:** | | |
|  | |  | | |
| **In what capacity are you known to them?** | | **In what capacity are you known to them?** | | |
|  | |  | | |
| References will only be requested after the offer of the trustee role has been made. | | | | |
| **ELIGIBILITY TO BE A TRUSTEE**  By signing this form I declare that:  🗆 I have no unspent convictions involving dishonesty, bribery or deception  🗆 I am not on the sex offenders register  🗆 I am not currently declared bankrupt (or subject to bankruptcy restrictions or an interim order)  🗆 I do not have an individual voluntary arrangement (IVA) to pay off debts with creditors  🗆 I am not disqualified from being a company director  🗆 I have not been removed from management or control of anybody under section s34(5)(e) of the Charities and Trustee Investment (Scotland) Act 2005 (or earlier legislation)  🗆 I have not been previously removed as an officer, agent, employee or trustee of a charity of the Charity Commission, the Scottish charity regulator, or High Court due to misconduct of mismanagement  **I confirm that the above information is correct to the best of my knowledge. I consent to Havering Mind processing, by means of a computer database or otherwise, any information I provide them for the purpose of this application.**  Note: This information will only be used for selection purposes. Unsuccessful applications will be kept for 12 months after the recruitment process is completed. | | | | |
| **NAME** |  | | **DATE** |  |
|  |  | |  |  |

**Thank you for offering your service.**

**Please return this form by post to:**

**Sarah Balser**

**Chief Executive Officer**

**Havering Mind,**

**Harrow Lodge House,**

**Harrow Lodge Park,**

**Hornchurch Road,**

**Hornchurch,**

**Essex, RM11 1JU**

**Alternatively, please email to Trustee@haveringmind.org.uk**



**Recruitment Analysis Form**

The information you supply will be separated from your application upon receipt. This information is not part of your application and will not be used in any part of the selection process. It will not be seen by the interviewers or those involved in the shortlisting your application. This information will be stored anonymously and confidentially. Please complete as much as you can.

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Position applying for:**   |  | | --- | |  |  1. **Where did you see this post advertised or how did you learn of this position?**  |  | | --- | |  |  1. **Gender**   Female 🗌  Male 🗌  Prefer not to say -  If you prefer to use your own term please provide this here:   |  | | --- | |  |  1. **Gender Identity**   Is your gender identity the same as the gender you were assigned at birth?  Yes 🗌  No 🗌  Prefer not to say -   1. **Sexual Orientation:**   Bisexual 🗌  Gay man 🗌  Gay woman/lesbian 🗌  Heterosexual/straight 🗌  Prefer not to say -  If you prefer to self describe, please give details here:   |  | | --- | |  |  1. **Disability:**   Do you consider yourself to have a disability?  Yes 🗌  No 🗌  Prefer not to say - | 1. **Date of Birth:**  |  | | --- | |  |  1. **Nationality:**  |  | | --- | |  |  1. **Ethnicity**:   Asian: 🗌  Black: 🗌  Mixed: 🗌  White: 🗌  Another: 🗌  Prefer not to say -  If you would prefer to self describe, please give details here:   |  | | --- | |  |  1. **Religion and Belief**   Buddhist 🗌  Christian 🗌  Jewish 🗌  Muslim 🗌  Non-religious (Atheist etc) 🗌  Sikh 🗌  Prefer not to say -  If you prefer to use your own definition please provide details here:   |  | | --- | |  | |