

Sands End Arts and Community Centre Trustee Application Form

Please read the Trustee Role Description and the Code of Conduct before completing this form.

Application Deadline: Sunday 2nd December 2018
Interviews: TBC

Personal Contact details

Name			
Home Address	Post Code		
Telephone	Home		Mobile
	Work		
E-mail			
Preferred means of contact			

Occupation				
Membership of professional Organisation				
Which of the following skills or experience could you bring to the Board?	Please indicate against each relevant area if this is your principle skill, by writing 'P', or a secondary skill where you have experience, by writing 'S'.			
		P/S		P/S
	Strategic Leadership		Arts Development	
	Financial / Accounting		Marketing / P.R.	
	Fund Raising/Income Generation		Welfare/Financial Inclusion	
	Legal/Charity Law		Children & Young People	
	Health & Wellbeing		Human Resources	

Please also state which position you are applying for:

The Person Specification outlines some of the key skills we seek in a potential Trustee. Please indicate against each of the following categories how you think your own skills and experience would enable you to fulfill the role of a Trustee.
(please use a separate sheet if needed)

Please send an upto date copy of your CV.

Key skills	Narrative
Personal Qualities	
Experience	
Knowledge & Skills	

Interest and motivation

Please explain why you would like to apply for the position of trustee of Sands End Arts and Community Centre.

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Please give details of two people who would be willing to provide a reference. We will not contact them before you are successful in securing a role on the board of trustees.

Name	Name
Address	Address
Post Code	Post Code
Tel: Email:	Tel: Email:

Signature

Date

DATA PROTECTION CONSENT

In accordance with the Data Protection Act 1998, the information provided on this form will be used in the recruitment and selection process and may be disclosed to all those who need to see it. It will also form the basis of the confidential personnel record of the successful candidate. In the case of unsuccessful candidates, the information will be destroyed after twelve months. In addition, it will be held on a database and used for equal opportunities monitoring purposes.

I confirm that I do not object to the information collected on this form being transferred onto computer for the purpose of anonymous statistical reporting, in accordance with statutory requirements and for the basis of compiling.

Signature

Date

DECLARATION OF ELIGIBILITY TO BECOME A CHARITABLE TRUSTEE

I declare that I am not disqualified from acting as a charity trustee and that (please tick to confirm and agree each statement below):

- I am not incapable of acting by reason of mental disorder within the meaning of the Mental Health Act 1983.
- I do not have an unspent conviction relating to any offence involving deception or dishonesty. **Because of the nature of the role you are applying for, you are required by the Rehabilitation of Offenders Act 1974 to declare all criminal convictions including those which are spent. Please detail therefore any such convictions in the space below:**

(A conviction will not necessarily be a bar to obtaining a position with this organisation)

- I am not an undischarged bankrupt nor have I made a composition or arrangement with, or granted a trust deed for, my creditors.
- I am not subject to a disqualification order under the Company Directors Disqualification Act 1986 or to an order made under section 429(b) of the Insolvency Act 1986.
- I have not been removed from the office of charity trustee or trustee for a charity by an Order made by the Charity Commissioners or the High Court on the grounds of any misconduct or mismanagement nor am I subject to an order under section 7 of the Law Reform (Miscellaneous Provisions) (Scotland) Act 1990, preventing me from being concerned in the management or control of any relevant organisation or body.
- I am not subject to a disqualification order under the Criminal Justice and Court Services Act 2000.
- I am not disqualified under the Protection of Vulnerable Adults List.

The information supplied in this application form is true and accurate to the best of my knowledge.

Signature

Date

Please attached the following documents and your completed application form to:

- **Completed and signed equalities and monitoring form**
- **Signed code of conduct form**

Please send the following completed documents;

- **Application form**
- **Equalities and monitoring form**
- **Code of conduct agreement**

Email: sands.endacc@lbhf.gov.uk

Postal address:

**Sands End Project
Development & Regeneration
London Borough of Hammersmith & Fulham
3rd Floor
Town Hall Extension
King Street
Hammersmith
London
W6 9JU**