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| Trustee application form  |

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| Please submit a short curriculum vitae (2 page max) together with this application form.  |

## Personal details

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| --- | --- | --- | --- |
| Surname |  |  | Telephone/textphone/fax/mobile(Please indicate which) |

|  |  |  |  |
| --- | --- | --- | --- |
| Other names |  | Home |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Address |  | Other |  |
|  |  |  |  |
|  |  | Email |  |
|  |  |  |  |

## Do you have any previous Volunteer/Trustee experience?

## Yes ☐ No ☐ (please check appropriate box)

## If yes, please give details

## I understand and am able and willing to commit necessary time, preparation and effort to the proper discharge of the responsibilities of a trustee. ☐

## Please refer to the attached information sheet.

## **Please tell us more about yourself**

In each section below, please give a brief outline of your skills, knowledge and experience.

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| **Summarise why you want to be a trustee and how you feel you could contribute to the trustees’ work for TDAS.** |
| Please tell us about your understanding of the gendered nature of domestic violence and abuse and what impact you think organisations like TDAS can do to bring about change? |
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| **Suitability****Are there any other facts, activities or connections which you feel might be raised in future about your suitability to hold the position of trustee and director at TDAS, for example because they present or may present a conflict of interest?** These may include issues such as personal relationships or membership of organisations or other circumstances. |
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##  References

## Please give the name and address of two referees who can comment on your suitability for this role. Please note references from relatives are not acceptable.

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| --- | --- | --- | --- | --- |
| Name |  |  | Name |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Position |  |  | Position |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Organisation |  |  | Organisation |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Address |  |  | Address |  |
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| --- | --- | --- | --- | --- |
| Telephone |  |  | Telephone |  |

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| Email |  |  | Email |  |

## Declaration

I confirm that the details given in this form are correct and understand that any false declaration may result in my removal from the board of trustees

* + I am aged 18 years or over at the date of this election or appointment
	+ I do not have an unspent conviction relating to any offence involving deception or dishonesty
	+ I am not an undischarged bankrupt nor have I made a composition or arrangement with, or granted a trust deed for, my creditors (ignore if discharged from such an arrangement)
	+ I am not subject to a disqualification order under the Company Directors Disqualification Act 1988 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 Commissions or the High Court on the grounds of any misconduct or mismanagement (or equivalent in other jurisdictions)
	+ I am not disqualified under the Protection of Vulnerable Adults List
	+ I will, if elected, undertake a Disclosure and Barring Service check
	+ I have read the Charity Commission booklet CC3: The Essential Trustee
	+ I hereby explicitly consent to TDAS holding my personal details within a manual or electronic filing system in relation to the Data Protection Act 1998
	+ I understand that if my application is progressed and / or if I am successful that appropriate DBS, credit, director checks will be undertaken.

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| Signature |  |  | Date |  |