**Trustee Application Form**

We ask all prospective trustees to complete this form as part of a safer recruitment process. If there is insufficient room to fully answer any question, please continue on separate sheet. The information will be kept confidentially by Thirtyone:eight, unless requested by an appropriate authority.

**1. Personal Details**

We will need to see birth/marriage certificates or documents regarding a change of name.

Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Maiden/Former Name(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postcode: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Daytime Tel No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mobile Tel No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Evening Tel: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How long have you lived at the above address? \_\_\_\_\_\_\_\_\_\_\_ Years \_\_\_\_\_\_\_\_\_\_\_\_\_Months

If less than 5 years, please give previous address(es) with dates:

From/To \_\_\_ /\_\_\_ /\_\_\_ \_\_\_ /\_\_\_ /\_\_\_ From/To \_\_\_ /\_\_\_ /\_\_\_ \_\_\_ /\_\_\_ /\_\_\_

Previous \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Previous \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address Address

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Post Code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Post Code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever had an offer to work with children, young people or vulnerable adults declined on the basis of suitability and/or risk assessment?

YES\* NO\* (\*Please indicate)

If yes, please give details

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**2. Trustee or Director Appointments**

Please tell us about your past and current trustee or company director appointments in the table below (most recent first):

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name of Charity or Company** | **Appointed****from (Date)** | **Appointed****to (Date)** | **Title** | **Reason for Leaving** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**3. Employment History**

Please tell us about your past and current employment / voluntary work in the table below (most recent first):

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Employers Name and Address** | **Employed****from (Date)** | **Employed****to (Date)** | **Job Title** | **Reason for Leaving** |
|  |  |  |  |  |
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**4. Education History**

Please tell us about your formal education history (most recent first).

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name of School/College or University** | **Attended****from (Date)** | **Attended****to (Date)** | **Course/Qualification Title** | **Result/Outcome or Grade** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
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|  |  |  |  |  |

**5. References**

Please complete the details below of two people who would be willing to provide a personal reference. If you are

currently working, (paid or voluntary) one of these should be your present employer. These people should be able to comment upon your character and suitability for this position. We reserve the right to take up character references from any other individuals deemed necessary.

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Post Code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Post Code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tel No \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Tel No \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please also provide the contact details for your current/most recent Church Leader/Minister/Vicar/Priest\*

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tel no: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*\* Trustees are required to have a personal Christian faith and commitment to the Thirtyone:eight Christian ethos.*

**6. Additional Information**

Please use this space to inform us of your skills, experience, knowledge, attributes and motivations for this trustee position and how you feel you would be able to contribute to the work of the Thirtyone:eight Board and generally. Please continue on separate sheets where necessary and attach them to your application form.

**7. Confirmations**

I confirm that the information I have given is true to the best of my knowledge. I understand that should the information I have supplied be false or inaccurate in any material way, Thirtyone:eight reserves the right to terminate either my involvement in the recruitment process or my employment should I later be appointed.

In applying to be a trustee I confirm that I meet the requirements of the trustees’ declaration statement.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_ / \_\_\_\_ / \_\_\_\_\_\_\_

**Self-Declaration Form**

**STRICTLY CONFIDENTIAL**

Please would you complete the attached self-declaration and consent to criminal records check form and email it to peter.wharrad@thirtyoneeight.org or place it in a sealed envelope (separately from your application form, placing your name on the outside rear of the envelope) and address it to:

STRICTLY CONFIDENTIAL

‘Chair of Trustees’

Thirtyone:eight

PO Box 133

Swanley

Kent

BR8 7UQ

You are welcome to discuss any aspects of this procedure with the Chair of Trustees if you wish. Please note that the existence of a criminal record does not exclude you from being able to apply for a position, unless there are clear legal reasons preventing this in specific circumstances. Please ask us for a copy of our Rehabilitation of Offenders Policy for details.

I confirm that the information I have given is true to the best of my knowledge. I understand that should the information I have supplied be false or inaccurate in any material way, Thirtyone:eight reserves the right to terminate either my involvement in the recruitment process or my employment should I later be appointed.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_ / \_\_\_\_ / \_\_\_\_\_\_\_

*As an organisation we undertake to meet the requirements of the Data Protection Act 1998, and all appropriate Acts in relation to Criminal Record Disclosures and the use and retention of criminal records data (incl. Self-Declaration Forms).*

**CONVICTION HISTORY**

**Have you ever been charged with, cautioned or convicted in relation to any criminal offence; or are you at present the subject of a criminal investigations/pending prosecution?**

Yes\* No\* (\*please indicate)

If yes, please give details including the nature of the offences and the dates. Please give details of the court(s) where your conviction (s) were heard, the type of offence and sentence(s) received. Please also give details of the reasons and circumstances that led to the offence(s). Continue on a separate sheet if necessary.

**DECLARATION**

To help us ensure that we are complying with all relevant safeguarding legislation, please complete the following declaration.

I, (full name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ of (address) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

agree to provide an enhanced DBS/Disclosure Scotland/Access NI check as part of the recruitment process for the position for which I have applied. I am aware that any offer of a trustee position is conditional upon receipt of satisfactory checks and confirmation of suitability by Thirtyone:eight.

I agree to inform the Chair of Trustees if I am convicted of any relevant offence after I take up any post. I understand that failure to do so may lead to the immediate suspension or the termination of my trusteeship.

I agree to inform the Chair of Trustees if I become the subject of a police and/or a social services (Children’s Social Care or Adult Social Services)/Social Work Department investigation. I understand that failure to do so may lead to the immediate suspension or the termination of my trusteeship.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*NB. If you have any questions regarding the completion of this form, please contact Peter Wharrad, the Chair of Trustees, on 07717 742571.*