Havering Shopmobility Association

Registered Charity No. 1051614

1 The Brewery, Waterloo Road,

Romford RM1 1AU

Tel: 01708 722570

E Mail: haveringshopmo@btconnect.com

Web Site: [www.shopmobilityromford.co.uk](http://www.shopmobilityromford.co.uk)

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| Application for the Role of Trustee |
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| Section 1 Personal details |

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| Title: |       | **Forename:** |       | Surname:  |       |

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| Address: |       |
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|  |       |

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| Postcode: |       |
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| Telephone N0: Home |       | **Mobile** |       |

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| **E-mail address:** |       |

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| Please state which lead role you are interested in |       |

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| **Are you aware of any potential conflict of interest, or loyalty,** **in being a Trustee with Havering Shopmobility? If so, give details** |  Yes | **[ ]**  | No | [ ]  |

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| **Do you have any unspent convictions or cases pending?** **If so, give details** |  Yes | [ ]  | No | [ ]  |

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| Section 2 Disabilities |

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| Do you consider yourself to have a disability? |

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|  Yes | [ ]  | No | [ ]  |

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| If Yes, please tell us if there are any reasonable adjustments we can make to assist you in your application or with the role as Trustee : |
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**Where did you hear about this job opportunity?**

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| Section 3 Personal Statement |
| You can either use this section to write a personal statement highlighting your skills and experience relevant to this role, or attach a c.v. Please ensure you address the points in the role description and document ‘What we are looking for in our Trustees’. Please outline what you can bring to the role.  |

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| Continue onto next page or separate sheets if necessary |

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| Section 4 References |

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| Please provide details of two referees who have known you personally for at least 5 years and will give their opinion of your suitability for this role. Present or previous employers, professionally qualified people, and people of standing in the community are preferred. They should not be related to you. Please include their email address if available as this is the preferred method of contact. |

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| **Referee 1** |  | **Referee 2** |

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| --- | --- | --- | --- |
| Name: |       | **Name:** |       |

|  |  |  |  |
| --- | --- | --- | --- |
| Position(job title): |       | **Position****(job title):** |       |

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| Work Relationship: |       | **Work Relationship:** |       |

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| Organisation: |       | **Organisation:** |       |

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| --- | --- | --- | --- |
| Address: |       | **Address:** |       |
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|  |       |  |       |
|  | Postcode |       |  | Postcode |       |

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| --- | --- | --- | --- |
| Telephone No: |       | **Telephone No:** |       |

|  |  |  |  |
| --- | --- | --- | --- |
| E-mail: |       | **E-mail:** |       |

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| Section 5 Declaration |

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| Statement to be signed by the ApplicantI am applying for the role of Trustee with Havering Shopmobility. I agree to support the aims of the Association to the best of my ability. I am not an undischarged bankrupt or disqualified from being a Company Director or Charity Trustee. I have disclosed all unspent convictions. The information I have given is true and complete to the best of my knowledge.  |

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| Signed: |       | **Date:** |      **(dd/mm/yyyy)** |
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|  **RETURNING THIS FORM (Closing date Monday, 30 November 2020):**  |
| @ **By Email (Preferred):****chairman.haveringshopmob@gmail.com** | 🖃 **By Post:**Mike Joyce, Chairman, Havering Shopmobility5 Ashburnham Gardens, Upminster, RM14 1XA |