Angels Logo

Address

Web address

**Trustee application form**

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| --- |
| **Name** |
| Title & First Name  |  |
| Surname  |  |
| **Address**  |
| House name/number |  |
| Road  |  |
| Town |  |
| County |  |
| Postcode  |  |
| **Contact Information**  |
| Home Phone  |  |
| Mobile  |  |
| Email |  |
|  **Experience**  |
| Current Role  |  |
| Previous employment |  |
| Qualifications  |  |

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| Which of the following skills or experience could you bring to the board?   |
| Please indicate relevant core skills areas below; |
| Teaching/education | HR/Business Management  |
| Financial/Accounting  | Marketing/PR  |
| Fundraising | GP/Medical/SEND/Autistic Spectrum specialism |

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| Please indicate why you want to become a Trustee of Angels Support Group Hitchin and how you think your own skills and experience would enable you to fulfil the role of a Trustee  |
|  |

Please give details of two people who would be willing to provide a reference.

Where possible, the first reference should be from your current/last employer. Referees

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| --- |
| 1st Referee  |
| Title & First Name  |  |
| Surname  |  |
|  |  |
| Relationship to you |  |
|  |  |
| House name/number |  |
| Road  |  |
| Town |  |
| County |  |
| Postcode  |  |
|  |  |
| Home Phone  |  |
| Mobile  |  |
| Email |  |

|  |
| --- |
| 2nd Referee  |
| Title & First Name  |  |
| Surname  |  |
|  |  |
| Relationship to you |  |
|  |  |
| House name/number |  |
| Road  |  |
| Town |  |
| County |  |
| Postcode  |  |
|  |  |
| Home Phone  |  |
| Mobile  |  |
| Email |  |

Trustee applicant’s declaration of eligibility:

I declare that:

* I am over age 18.
* I am not an undischarged bankrupt.
* I have not previously been removed from trusteeship of a charity by a Court or the Charity Commission. as described in the Role Description
* I am not under a disqualification order under the Company Directors' Disqualification Act 1986.
* I have not been convicted of an offence involving deception or dishonesty (unless the conviction is spent).
* I have not entered a composition or arrangement with creditors, or have an individual voluntary arrangement (IVA) and I am not on the Insolvency Service Register
* I undertake to fulfil my responsibilities and duties as a trustee of Angels Support Group Hitchin in good faith and in accordance with the law and within Angels objectives/mission and Code of Conduct for trustees.
* I do not have any financial or other interests in conflict with those of Angels Support Group Hitchin (either in person or through family or business connections) except those that I have formally notified in a conflict of interest statement. I will specifically notify any such interest at any meeting where trustees are required to make a decision which affects my personal interests, and I will absent myself entirely from any decision on the matter and not vote on it.

|  |  |  |  |
| --- | --- | --- | --- |
| Signature |  | Date |  |

Privacy notice:

Information obtained will only be shared with the Angels Trustee Board. No other information about you will be shared.