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**Trustee Application Form**

Thank you for expressing an interest in becoming a Trustee with Age UK Cheshire. Please complete the application form below and provide a copy of your CV.

**NAME:**

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| **Please provide evidence to support one or more of the following competencies:** |
| 1. Commitment to enhancing later life for older people. |
| 1. Board Membership (as an executive, non-executive or trustee) |
| 1. Local community involvement |

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| **Please provide details of any additional skills you feel relevant to the Trustee role:**  (Please continue on additional pages if needed.) | | | |
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| **Please provide details of two referees, who will be approached if your application is successful** | | | |
| Name: |  | Name: |  |
| Contact No: |  | Contact No: |  |
| Email Address |  | Email Address |  |

**CHECKLIST FOR ELIGIBILITY TO BE A TRUSTEE (please tick)**

**Please visit the link below to ensure you meet the eligibility criteria to be a Trustee**

[**https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\_data/file/731084/010818\_Disqualification\_Reasons\_Table\_v2.pdf**](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/731084/010818_Disqualification_Reasons_Table_v2.pdf)

**Declaration**

**Please tick to declare that:**

|  |  |
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|  | I am not disqualified from acting as a trustee; and |
|  | I will inform Age UK Cheshire promptly if, after the date of this application,  one or more of the disqualification reasons applies to me. |

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| **Please declare any personal relationship you may have with staff or volunteers within Age UK Cheshire:** |
| **Please declare any potential Conflict of Interest you may consider in relation to your application to become a Trustee of Age UK Cheshire:** |

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| **I declare that the information I have given is true and correct.**  **Signature:**  **Date:**  (Email signature will be accepted) |