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**TRUSTEE APPLICATION FORM**

**Personal details**

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| **Surname:** |  |
| **First name:** |  |
| **Address and postcode:** |  |
| **Email address:** |  |
| **Contact telephone number:** |  |
| **Preferred method of contact:** |  |

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| **General information for prospective trustee volunteers** |
| **Please ensure you have read the Trustee Role description**  |
| **To be a Trustee of a charitable company limited by guarantee you must a ‘fit and proper person’ in law** **If you meet these requirements, we welcome your application.*** I am not disqualified from acting as a Charity Trustee or from serving as a Company Director
* I have not been removed from serving as a charity trustee, or been stopped from acting in a management position within a charity
* I have not been convicted of any offence involving deception or dishonesty (or any such conviction is legally regarded as spent)
* I have not been involved in tax fraud
* I am not an undischarged bankrupt
* I have not made compositions or arrangements with my creditors from which I have not been discharged
* I will at all times seek to ensure the charity’s funds, and charity tax reliefs received by Age UK Enfield as used only for charitable purposes as outlined in the Memorandum and Articles of Association
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**Trustee skills and experience**

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| **1. Why are you interested in volunteering as a trustee with Age UK Enfield?**  |
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| **2. Please describe the skills, knowledge and experience you have that would be useful for the role** |
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| **3. What do you hope to** **get from the experience?** |
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| **4. Employment and Education History**Please outline any current and past employment and education, including dates, main responsibilities and qualifications achieved  |
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| **5. Is there anything you have done over the past few years that you would like to tell us about?**For example, work background, volunteering experience, community activity(involvement in tenants’ associations, school activities, support groups), caring for children, other relatives or friends, classes, training courses etc. |
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| **6. What do you think are some of the main problems facing older people in Enfield?** |
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| **7. What training or support do you think you may need?** |
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| **8. Is there anything else you would like to say about yourself?** |
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| **9. Are there any adjustments we can make to assist you in your application and** **/ or interview?** This information will be treated as confidential. |
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## References

Please give the names and addresses of two people, who know you in a work related, academic or professional capacity. For example, an employer, teacher or tutor, colleagues or ex-colleagues, or someone who knows you well (other than your family).

**Referee 1:**

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| **Name** |  |
| **Address and postcode** |  |
| **Email address /****telephone number** |  |
| **In what capacity do they know you?** |  |

**Referee 2:**

|  |  |
| --- | --- |
| **Name** |  |
| **Address and postcode** |  |
| **Email address /****telephone number** |  |
| **In what capacity do they know you?** |  |

Please return your completed application form to the Chief Executive, Peter Glass at peter.glass@ageukenfield.org.uk