

**APPLICATION FORM**

**Age NI Consultative Forum**

**Personal details**

**First Name/Surname:**

**Address:**

**Postcode:**

**Tel no (Home)**

**Tel no: (Mobile)**

**Email:**

**Referees**

**Please provide details below of TWO referees, who should be individuals who have known you either in a professional capacity or a community capacity. Please note: they should not be relatives or close friends.**

**Referee 1: NAME**

**Address:**

**Email:**

**Contact tel no:**

**Relationship to you:**

**Referee 2: NAME**

**Address:**

**Email:**

**Contact tel no:**

**Relationship to you:**

**ADDITIONAL INFORMATION**

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| **What do you believe to be the key issues facing people as they get older?** |

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| **Please outline your knowledge of the work of Age NI** |

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| **Please describe how your skills, knowledge or experience could benefit the work of the Age NI Consultative Forum** |

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| **Please demonstrate your ability to listen effectively, communicate well and influence others** |

**Additional information**

**Please include below any additional information in support of your application**

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**Personal Declaration**

I declare that all the foregoing statements are true and complete to the best of my knowledge and belief.

I understand that any wilful misstatement or omission renders me liable to disqualification.

I understand that I will undergo a full Access NI security check if successful in joining the Age NI Consultative Forum

Age NI reserves the right to verify any information provided

**Signature: Date:**

Please return completed application form to:

Seamus Donnelly, Age NI

3 Lower Crescent, Belfast

BT7 1NR

Or by Email to: seamus.donnelly@ageni.org