**Expression of Interest to Volunteer with**

**Age UK’s Policy Sounding Board – Policy Reviewer Role**

**Section A: Your personal details**

**Full Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **County:**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Postcode:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Telephone:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Mobile:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Email:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**We aim to include a diverse range of ages and gender, please select which apply to you:**

**Your Gender:** Female ☐ Male ☐ Alternatively, please tell us here how you describe your gender: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Your Age:**  <50 ☐ 50-54 ☐ 55-59 ☐ 60-64 ☐ 65-69 ☐

70-74 ☐ 75-79 ☐ 80-84 ☐ 85+ ☐

**Section B: Your experience**

**We welcome a diverse range of experiences to draw upon, please tick one or more boxes below that best match your past or present experience:**

☐  **A user of public services, for example, hospitals, GPs, social services and housing**

☐ **A carer or intermediary of someone receiving services or similar**

☐ **A commissioner or deliverer of services - public, private or charitable sector**

☐ **A role involving standard setting, monitoring & regulation of services or products used by older people**

☐  **A professional or other informed interest such as membership of a Patient Participation Group or Housing Association Residents Committee**

☐ **Other relevant experience (please state in part 2 overleaf)**

**Section B: Your experience (cont.)**

**Part 2 - Please share with us in up to 200 words how you think the**

**Policy Sounding Board will benefit from your area(s) of experience**

**Section C: Your involvement**

1. **Please tell us in up to 200 words why you are interested to join the Policy Sounding Board**
2. **Please tell us how you found out about this Policy Sounding Board engagement opportunity.**
3. **☐ Please tick here if you would like to hear about other national**

**engagement opportunities with Age UK.**

**How will your personal information be used?**

Age UK adheres to the Data Protection Act (2018) and The General Data Protection Regulation (GDPR) (2018).

The information that you share with us via the Expression of Interest form will be used by a limited number of Age UK staff and volunteers for the purpose of allocating places to the Policy Sounding Board and for the purpose of contacting you. Any information provided on this form will be treated with respect, kept confidential and stored securely.

We will contact you with next steps by the end of **Friday 13th December 2019**. For those allocated a place your information will be retained during your time on the Policy Sounding Board. For those we are unable to accommodate due to limited places we will only continue to retain your contact information if you tell us you wish to hear about other national engagement opportunities.

By signing this form, you confirm that as far as you are aware, you are available for the ‘meet and greet’ induction day on **Wednesday 15th January 2020** and four full sounding board meetings on **Thursday 13th February, Thursday 7th May, Thursday 2nd July** and **Wednesday 28th October 2020.**

Signed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date form completed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please email your completed form to Liz Stacey, Divisional Services Co-ordinator at [engagement@ageuk.org.uk](mailto:engagement@ageuk.org.uk) or return a hard copy by post to (no stamp required):

**Liz Stacey, Freepost RTEH-ALYL-JJZU,**

**Age UK, Tavis House, 1-6 Tavistock Square,**

**London WC1H 9NA**

Please return your Expression of Interest form by **Wednesday 20th November** **2019.** We will contact you with next steps on **Friday 13th December 2019**.

**Thank you for your interest.**

If at any stage you wish to no longer continue with your Expression of Interest, please email Liz Stacey, Divisional Services Co-ordinator at: [engagement@ageuk.org.uk](mailto:engagement@ageuk.org.uk) or call 0203 033 1152. Thank you.

For more information on our privacy policy please search google or copy the following link into your browser <https://www.ageuk.org.uk/help/privacy-policy/>