

Trustee Application Form

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| **THANK YOU FOR YOUR INTEREST IN BECOMING A TRUSTEE FOR THE PICKAQUOY CENTRE.** **TO MAKE AN APPLICATION, PLEASE COMPLETE THIS FORM IN FULL AND SUBMIT TO** **hr@pickaquoy.com****This application will be used to assess the skills, experience and interests of applicants. Please be specific on your reasons for applying to become a Trustee and the skills and experience you will bring to the role.** We are aware of our obligations under data protection legislation, including the obligation to collect only the data that is required for our specific purpose. We will treat all personal information about you with utmost integrity and confidentiality and your data will be processed in line with the data protection principles within current data protection legislation, and in accordance with our data protection policy. In completing this form, you consent to us holding your personal details on our recruitment database in order for us to contact you only in relation to recruitment activity.  |

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| Return this form to: |  | Date of Application: |
| **hr@pickaquoy.com** |  |  |

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| Personal Details |
| Name | Title: |  |
| Forename(s):  |  |
| Surname:  |  |
|  | Preferred name (If applicable): |  |
| Contact Information | Address:  |  |
| Post Code: |  |
| Email Address:  |  |
| Tel No: |  |
| Current Occupation:  |  |

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| Have you been a Charity Trustee before? |
|  | Yes:  |  | No: |  |  |
| If Yes, Please Provide Details: |  |

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| Are you over the age of 18 years? |
|  | Yes:  |  | No: |  |  |

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| Are you an Elected Member or employee of Orkney Islands Council, or have you been an Elected Member of Orkney Islands Council within the last 4 years? |
|  | Yes:  |  | No: |  |  |
| If Yes, Please Provide Details: |  |

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| Why do you wish to become a Trustee? |
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| Please list any groups, clubs or organisations with which you have been or are involved in and at what capacity: |
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| Do you have any professional skills in any of the areas indicated below? Please indicate against each relevant area whether it is your principal skill by writing ‘P’, or a secondary skill by writing ‘S’ |
|  | **P/S** |  | **P/S** |
| Sport & Leisure |  | Marketing or Communication |  |
| External Grant Applications/Fund Raising |  | Strategic Planning |  |
| Finance |  | Governance |  |
| Business Management |  | Health & Safety |  |
| Law |  | Human Resource Management |  |

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| Please provide a brief biography of yourself and your career to date, particularly including details of any experience and/or interests that are relevant to this role (whether through paid employment or voluntary/participatory activities) Following the recruitment process, should you be successful in being offered and accepting the role of Trustee, this biography will be distributed to the board of trustees as a means of introduction. |
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| Do you make significant use of The Pickaquoy Centre facilities or services? If so, please provide details: |
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| Have you ever been the subject of an application for a disqualification order under the Companies Directors Disqualification Act 1986 or had such an order made against you? |
|  | Yes:  |  | No: |  |  |
| Have you ever been convicted of a criminal offence (excluding minor motoring offences)?  |
|  | Yes:  |  | No: |  |  |
| If yes to either of the above, please provide details: |
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| Conflicts of interest: |
| Have you, or any organisation you are a member of, represent, or have a pecuniary interest in, ever been a beneficiary of The Pickaquoy Centre: |
|  | Yes:  |  | No: |  |  |
| Have you, or a family member, or your employer, undertaken work for or supplied services to The Pickaquoy Centre: |
|  | Yes:  |  | No: |  |  |
| If yes to either of the above, please provide details (please note this would not exclude applicants from Joining the Trust, but may affect future participation in some discussions): |
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| References (please note here two persons, not including relatives, from whom we may obtain either character or work references): |
| Reference #1 | Title: |  |
| Forename(s):  |  |
| Surname:  |  |
| Address: |  |
| Post Code: |  |
| Email Address:  |  |
| What is their Connection with you:  |   |
| Reference #2 | Title:  |  |
| Forename(s): |  |
| Surname: |  |
| Address: |  |
| Post Code: |  |
| Email Address:  |  |
| What is their connection with you: |  |

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| Equal Opportunities  |
| Please tell us if there are any reasonable adjustments, we can make to assist you in your application or with our recruitment process. |

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| Declaration (please read this carefully before signing this application) |
| 1. I confirm that the information provided in this application is complete and correct and that I authorise you to contact the referees named above for any further information you may require in relation to my application.
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| Signed (print name): |  | Date: |  |