Fife Shopmobility Ltd

Board of Directors

Application Form

Name

Address

Contact Telephone numbers

Occupation:

Please enclose a CV if available.

1. What kind of expertise do you consider you would bring to the Board?

Campaigning Knowledge of the Voluntary Sector

Human Resources/Training Change

Information Technology Management/Restructuring

Health & Safety Consultancy

Legal Customer Care

Management/Management Systems Development

Marketing Disability Issues

Media/PR Equal Opportunities

Networks/Alliances Financial

Policy Development Fundraising

Research Strategic Planning & Training

Governance Property

Conflict Resolution Knowledge of the Community

Other

Please give further details:

2. What other experience or skills do you feel you offer?

3. Are there any areas of the organisation’s work that you have a particular interest in and/or would like to be involved in?

4. For what reasons are you interested in becoming a Director of Fife Shopmobility Limited?

5. Referees

Please give the names and addresses of two people who can comment on your suitability as a Director of Fife Shopmobility Limited.

**First referee**

Name:

Position:

Organisation:

Address

Tel No.

Email address:

In what capacity does this person know you?

May we contact this referee immediately? YES/NO

**Second referee**

Name:

Position:

Organisation:

Address:

Tel No.

Email address:

In what capacity does this person know you?

May we contact this referee immediately? YES/NO

Signature Date

Please return to [kath@shopmobilityfife.uk](mailto:kath@shopmobilityfife.uk)