

**Shetland Women’s Aid**

**Application Form for the position of**

**Trustee with Shetland Women’s Aid**

**The post will be subject to a PVG Scheme check and satisfactory references.**

**Women only need apply under Schedule 9 (Part 1) of the Equality Act 2010. Applicants must be over 18 years old.**

**Section 1: Personal Details**

Please complete all the information requested below.

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| **Name** |
| **Address** |
| **Postcode:** |
| **Telephone Number:** **Home: Work:** |
| **Email address:** |
| **Occupation (if currently employed):** |
| **Date of Birth:** |
| **Please confirm you have not used our services in the last 12 months:**  |

**Section 2: Relevant skills, knowledge, and experience**

In this section, please outline how your knowledge and skills meet those required for the role of Trustee (as outlined in the Person Profile). You should draw on your experiences from your current or previous activities whether in the voluntary sector, in employment or from other relevant situations.

**Section 3: Interest in applying**

Please tell us why you are interested in becoming a Trustee of Shetland Women's Aid.

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**Section 4: Declaration**

**Data Protection Statement**

The information that you provide on this form and that obtained from other relevant sources will be used to process your application to become a Trustee of Shetland Women's Aid.

The personal information that you give us will also be used in a confidential manner to help us monitor our recruitment process. If you become a Trustee, the information will be used in the administration of your registration with OSCR. We may check the information collected, with third parties or with other information held by us. We may also use or pass to certain third parties’ information to prevent or detect crime, to protect public funds, or in other ways as permitted by law.

By signing the application form we will be assuming that you agree to the processing of sensitive personal data, (as described above), in accordance with our registration with the Data Protection Commissioner.

**References**

We would also require the names of two individuals who can provide a written reference with regards to your suitability for this position. One of these can be a personal reference.

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| **Name:****Job title:****Address:****Email:****Tel. No.:****Relationship:** | **Name:****Job title:****Address:****Email:****Tel. No.:****Relationship:** |

**Disqualification**

Section 69 of the Charities and Trustee Investment (Scotland) Act 2005 disqualifies the following from acting as charity trustees:

* Someone with an unspent conviction for dishonesty under the Act
* An undischarged bankrupt
* Someone who has been removed under either Scottish or English Law or the courts from being a charity trustee.
* A person disqualified from being a company director.

It is the responsibility of the individual to ensure they personally are not disqualified from being a charity trustee.

**Declaration**

I declare that I am not disqualified from acting as a Charity Trustee and that the information given on this application is correct and complete.

Signed

Print Name

Date

**Please return completed application form to:** Email: office@shetlandwa.org

Shetland Women’s Aid

121A St Olaf Street

Lerwick

Shetland

ZE1 0ES