

# Board of Directors Application Form

**Personal Details**

|  |  |  |  |
| --- | --- | --- | --- |
| Surname |  | Initials |  |
| Address |  | Post Code |  |
| Telephone Day |  | Evening |  |
| Mobile |  | Email |  |
| I am happy to receive information by email | Yes | No | I am happy to be contacted on my mobile when required | Yes | No |

|  |  |
| --- | --- |
| 1 | **Why are you interested in joining Shopmobility’s Board of Directors?** |
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| --- | --- |
| **2** | **What contact, if any, have you had with Shopmobility?** |
|  |

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| --- | --- |
| **3** | **Do you have any specific interest in mobility issues?** |
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|  |  |
| --- | --- |
| **4** | **Have you ever worked with or volunteered with a third sector organisation?** |
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|  |  |
| --- | --- |
| **5** | **What skills do you have, that you think will be useful to the governance of Shopmobility?** |
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| --- | --- |
| **6** | **Please indicate which areas/roles of the Board would you have a particular interest in? (please tick)** |
| Chair |  | HR |  |
| Treasurer |  | Strategy and Planning |  |
| Secretary |  | Legal |  |
| Vice Chair |  | Fundraising |  |

|  |  |
| --- | --- |
| **1. Present/most recent employer** | **2. Previous employer/other** |
| Name | Name |
| Job title | Job title |
| Address | Address |
|  |  |
|  |  |
| Tel no. | Tel no |
| Mobile: | Mobile: |

**Referees**

**Please provide any other information you feel will strengthen your application?**

**We may require you to complete a PVG Scheme Application**

 Yes No

**Rehabilitation of Offenders Act 1974:** Do you have any unspent convictions?

If yes, please specify

*Please note that a conviction will not necessarily exclude you from volunteering, but will be taken into account when assessing your suitability.*

**Data Protection Statement**The information you provide on this form will be treated in the strictest confidence and will be used only for recruitment purposes. However, if you succeed in your application and support people through us, the information will also be used for the administration of your volunteering with us and to provide you with information about us or third parties working with us.

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 funds, or in other ways as permitted by law.

By signing the application form you agree to the processing of personal sensitive data (as described above) in accordance with the Data Protection Act, 1998.

**I agree to the data protection statement above and I certify that all statements given on this form by me are true and correct to the best of my knowledge.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Signature** |  | **Date** |  |

**Please complete and return this application form with a copy of your CV to:** **Shopmobilitypaisley2019@outlook.com** **or**

**Shopmobility Paisley and District, The Paisley Centre, Multi-Storey Car Park, Storie Street, Paisley PA1**