



WEST LOTHIAN WOMEN'S AID



TRUSTEE APPLICATION FORM

THANK YOU FOR CONSIDERING JOINING OUR BOARD OF DIRECTORS WHO ARE A COMMITTED TEAM PROUD TO HELP CHANGE THE LIVES OF WOMEN, CHILDREN AND YOUNG PEOPLE EXPERIENCING DOMESTIC ABUSE.

IN ORDER THAT WE MAKE A PROPER ASSESSMENT OF YOUR APPLICATION, PLEASE COMPLETE ALL SECTIONS. YOU MAY ADD ADDITIONAL INFORMATION IF YOU FEEL THIS WOULD SUPPLEMENT YOUR APPLICATION ON A SEPARATE SHEET OF PAPER.

PLEASE NOTE THAT WEST LOTHIAN WOMAN'S AID IS COMMITTED TO EQUALITY AND DIVERSITY AND AS SUCH POSITIVELY ENCOURAGES APPLICATIONS FROM WOMEN THROUGHOUT THE COMMUNITY. ONLY WOMEN MAY APPLY UNDER SCHEDULE 9 PART 1 OF THE EQUALITY ACT 2010.

SECTION 1: PERSONAL DETAILS

NAME

DATE OF BIRTH

PHONE NUMBER(S)

EMAIL(S)

ADDRESS

SECTION 2: CURRENT OR VOLUNTARY COMMITMENTS

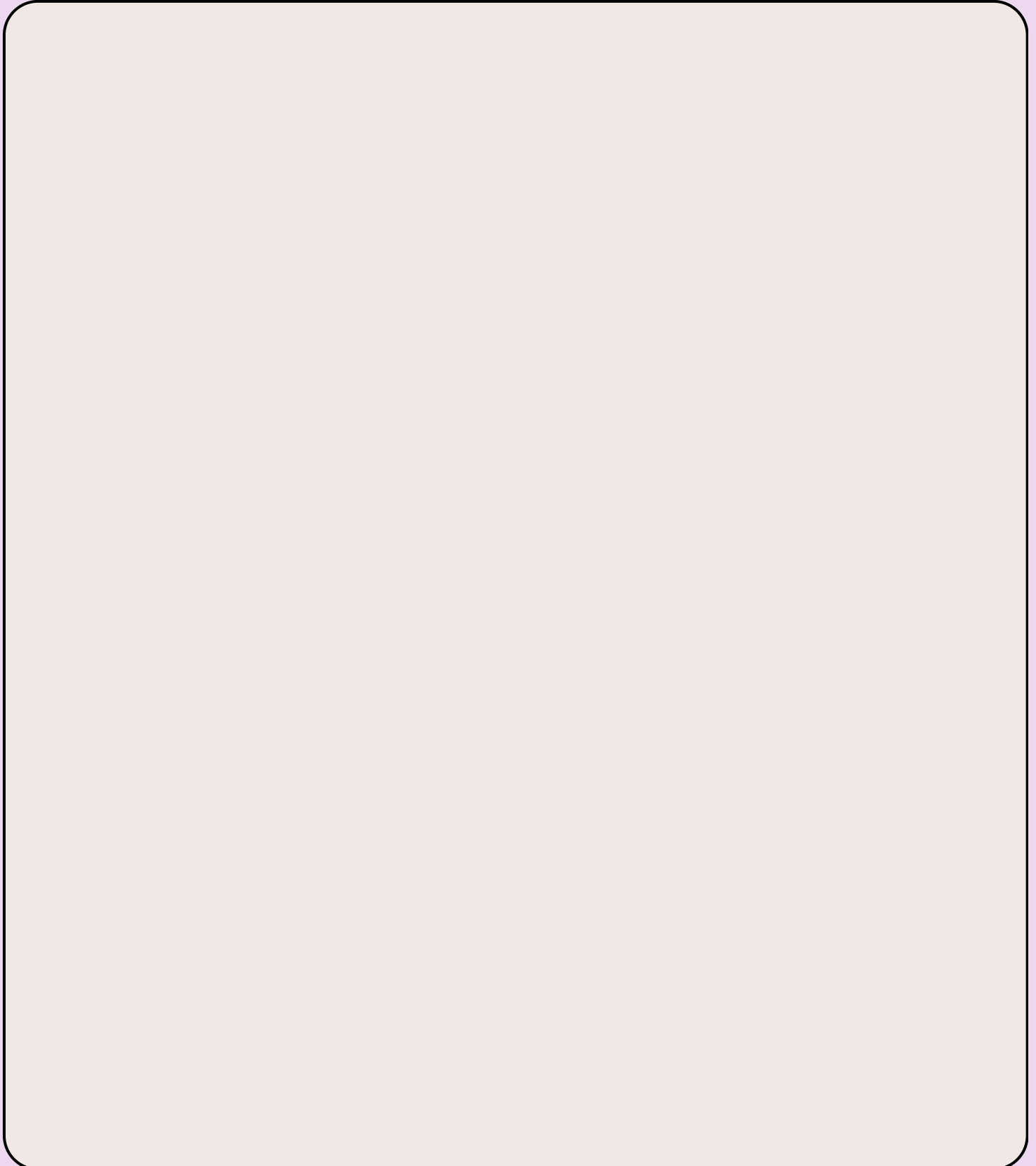
PLEASE TELL US OF ANY CURRENT OR PREVIOUS PAID OR UNPAID COMMUNITY OR VOLUNTARY COMMITMENTS THAT MAY BE RELEVANT TO YOUR APPLICATION.

ORGANISATION	ADDRESS	DATES FROM/TO	POSITION & INVOLVEMENT



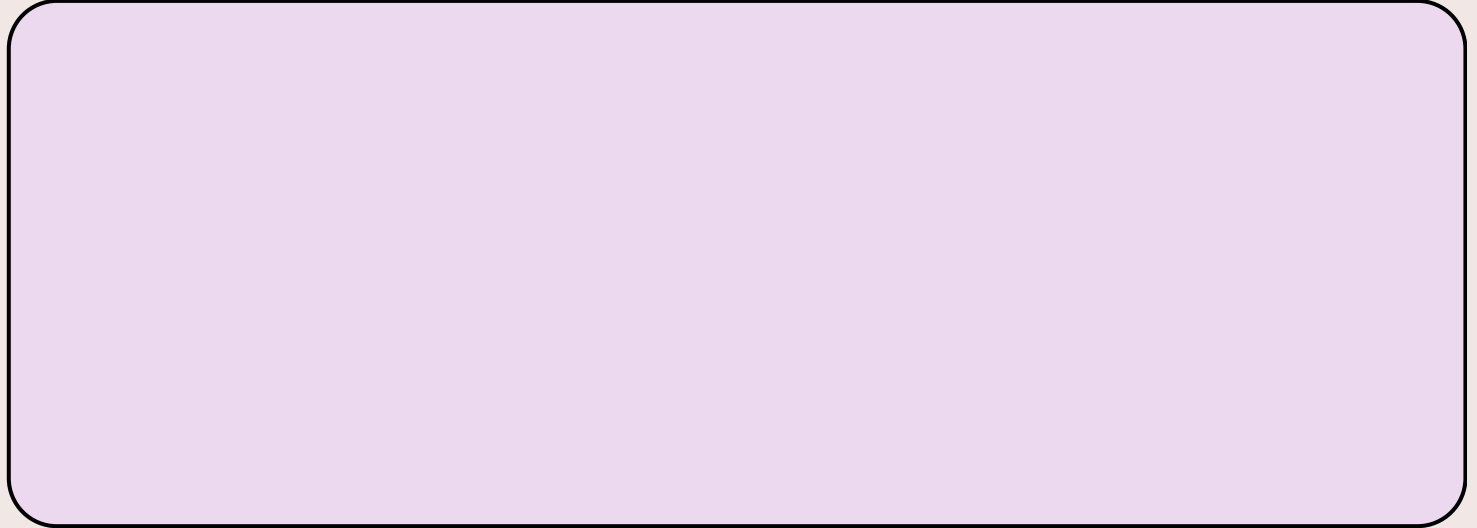
SECTION 3: RELEVANT SKILLS, KNOWLEDGE & EXPERIENCE

PLEASE OUTLINE HOW YOUR KNOWLEDGE, SKILLS AND EXPERIENCES MEET THOSE REQUIRED FOR THIS ROLE AS OUTLINED IN THE ROLE DESCRIPTOR ATTACHED. YOUR RESPONSE SHOULD HIGHLIGHT WHAT UNDERSTANDING YOU MAY HAVE OF THE COMPLEXITIES AND IMPACT OF DOMESTIC ABUSE ON WOMEN, CHILDREN AND YOUNG PEOPLE.



SECTION 4: REASON FOR APPLICATION

PLEASE SUPPLEMENT THE INFORMATION PRESENTED IN SECTION 3 ABOVE, BY SUMMARIZING WHY YOU ARE INTERESTED IN BECOMING A BOARD MEMBER OF WEST LOTHIAN WOMEN'S AID.



AT WLWA WE ARE PASSIONATE ABOUT WORKING TOGETHER TO GROW A CULTURE OF:

SAFETY - TAKING PERSONAL RESPONSIBILITY TO PROVIDE FOR EMOTIONAL WELL-BEING

HONESTY - AUTHENTICALLY BUILDING TRUST WITH OPENNESS AND COMPASSION

EMPOWERMENT - VALUING EVERYONE AND ENABLING THEIR UNIQUE POTENTIAL

PLEASE USE THIS SPACE TO PROVIDE SPECIFIC DETAIL ON HOW YOU FEEL YOU WORK IN ALIGNMENT WITH, AND WOULD PRACTICE IN ACCORDANCE WITH, OUR VALUES.



SECTION 6: REFEREES

PLEASE PROVIDE DETAILS OF TWO PEOPLE WHOM WE MAY APPROACH FOR A REFERENCE.

(PLEASE NOTE: WE WILL NOT CONTACT ANY REFEREES WITHOUT YOUR PERMISSION).

NAME:		
POSITION:		
HOW KNOWN TO YOU:		
ADDRESS:		
E-MAIL:		
TELEPHONE:		
MAY WE CONTACT REFEREES BEFORE A BOARD POSITION IS OFFERED TO YOU?	YES NO	YES NO



SECTION 7: DATA PROTECTION

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 BOARD MEMBER OF WEST LOTHIAN WOMEN'S AID.

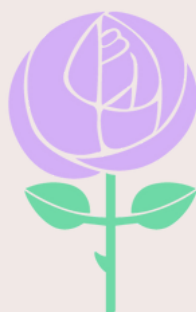
THE PERSONAL INFORMATION PROVIDED WILL ALSO BE USED IN A CONFIDENTIAL MANNER TO HELP US MONITOR OUR RECRUITMENT PROCESS, AND WILL BE STORED IN A SECURE LOCATION. IF YOU BECOME A BOARD MEMBER, THE INFORMATION WILL BE USED IN THE ADMINISTRATION OF YOUR REGISTRATION WITH OSOR AND THE CARE INSPECTORATE. 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

SECTION 8: ELIGIBILITY & DISQUALIFICATION

APPOINTMENT TO THE POSITION OF BOARD MEMBER MAY BE SUBJECT TO CHECKS WHICH IMPACT ON ELIGIBILITY, INCLUDING PROTECTION OF VULNERABLE ADULTS (PVG).

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.



SECTION 9: DECLARATION

I CERTIFY THAT ALL THE INFORMATION CONTAINED IN THIS FORM AND ANY ATTACHMENTS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

I UNDERSTAND AND CONSENT TO THE USE OF INFORMATION AS OUTLINED IN SECTION 6.

I CONFIRM THAT I KNOW OF NO REASON WHY I WOULD NOT QUALIFY FOR AS A BOARD MEMBER OF A REGISTERED CHARITY.

I AGREE TO PARTICIPATE IN ANY CHECKS (PVG) REQUIRED WHICH MAY IMPACT ON ELIGIBILITY TO SERVE AS A BOARD MEMBER.

SIGNATURE:

DATE:

