



Application form for prospective Letham for All SCIO Board Members

Please complete this form (in BLOCK CAPITALS and BLACK INK) if you wish to be considered for membership of the Board.

Section A: Personal details

Name:	Date of Birth:
Home Address:	Tel. No. Home:
	Tel. No. Work:
	Mobile:
Post Code:	Email address:

If working, please indicate whether we may email or phone you at work

Email at Work

Phone at work

Please return your completed application form to: **Chair of the Letham for All Board, Letham Health & Wellbeing Hub, 119 Rannoch Road, Perth PH1 2 DQ or email it to letham4all@gmail.com**

Information from the application form will be used as the basis on which to find out more about the nominated Board member and help develop any required training.

Section B: Details of current membership

(Before an appointment is made to the Board, a nomination will be requested)

Length of membership:
Previous board positions or roles (If any):
Brief description of your responsibilities:
Name, address, email address of referee:

Section D: Your assessment of areas of expertise

Your experience cont'd					
How experienced or knowledgeable do you rate yourself in the following areas (1 being very experienced and 5 being not experienced at all)? Please note, we are not expecting you to be an expert in all or any these areas!	1 Experienced	2	3	4	5 Inexperienced
Working with people					
Young people					
Children and Families					
Vulnerable young adults					
Older people					
People with learning disabilities					
People from different ethnic backgrounds					
LGBT					
Business					
Business strategy					
Business planning and business management					
Financial & treasury management					
Planning and Evaluation					
Staffing and organisational development and HR management					
Public relations, media and communications					
Information technology					
Marketing					
Legal					
Freedom of information/Data Protection					
Equal opportunities and diversity of practice					



Section E: What will you bring to the Board?

Why do you want to be a Board Member?

Please tell us about why you want to be a Board Member.

What do you think you will bring to the Board?

Please tell us about the qualities, abilities and skills you think you will be able to contribute to the Board. Particularly tell us about how your previous experiences will help you to be an appropriate Board member.

Section H: Declarations

The **Scottish Charity Regulator** (OSCR) asks that the prospective charity trustee/governors declare that they are not disqualified from serving as charity trustee/governors. **Anyone who acts as a charity trustee/governor while disqualified is guilty of an offence punishable by imprisonment, or a fine, or both.** Sections 69 and 70 the Charities and Trustee Investment (Scotland) Act 2005 set out the circumstances that would disqualify an individual. In general terms if a person has been convicted of an offence involving dishonesty, or of an offence under the Act, or is an undercharged bankrupt, they may not serve as a charity trustee/governor. Nor may they do so if they have been removed from serving as a charity trustee/governor, or from acting in a management position within a charity, under previous charity law; nor if they have been disqualified from serving as a Company Director. A person is not disqualified if their conviction is spent by virtue of the Rehabilitation of Offenders Act 1974.

If you are uncertain whether or not you are disqualified, please ask us. We may, on application from the person disqualified, issue a waiver, which may either lift the disqualification generally, or specifically in relation to a particular charity or type of charity.

We consider it of great importance that charity trustees/governors are made aware of the duties and responsibilities of their position at the outset. Section 66 of the Charities and Trustee Investment (Scotland) Act 2005 sets out the general duties of charity trustees/governors, who must

- act in the interests of the charity, putting its interests before their own interests or those of any other person or organisation
- seek, in good faith, to ensure that the charity operates in a manner that is consistent with its objects or purposes
- act with the care and diligence that is reasonable to expect of a person who is managing the affairs of another person
- ensure that the charity complies with the provisions of the Act.

Any breach of these duties will be treated as misconduct in the administration of the charity.

I declare that the above information on this form is correct and understand that if appointed, I will be liable to action including removal from the Board and / or criminal action should I knowingly give false information.

Signature: |

Date:



Applicant Monitoring

CONFIDENTIAL

Please complete this form so that we can monitor the diversity of those applying for board membership. This form will be kept separate from your application form, and has no part in the selection process.

Surname:
Forename(s):

Please tick appropriate boxes

Ethnic Group

Do you regard yourself as:

- | | | | |
|--|--------------------------------------|--|----------------------------------|
| <input type="checkbox"/> Black – African | <input type="checkbox"/> Chinese | <input type="checkbox"/> Scottish | <input type="checkbox"/> British |
| <input type="checkbox"/> Black – Caribbean | <input type="checkbox"/> Indian | <input type="checkbox"/> Irish | |
| <input type="checkbox"/> Black – Other (<i>please describe</i>)
----- | <input type="checkbox"/> Bangladeshi | <input type="checkbox"/> White – Other (<i>please describe</i>)
----- | |
| <input type="checkbox"/> Pakistani | | | |
| <input type="checkbox"/> Other (<i>please describe</i>)
----- | | | |

Gender

I am: Female Male

Disability

Do you consider yourself to be disabled? Yes No