## Magna Vitae Trustee Director

## **Application Form**



magnavitae.org



This application form will be used to assess the skills, experience and interests of those people who have applied to become a Trustee Director, please be as honest as possible.

For example, explain your reasons for wanting to become a Trustee Director and what skills and experience you will bring to the role.

Name: Address: Postcode: Workplace: Email Address: Day Time Telephone: Mobile Number: 1. Why do you wish to become a Trustee Director and what would you hope to achieve for the Trust?

2. Please explain how your skills, experience and aptitudes make you suitable for this position and how you fulfil the person specification included with the Information Pack. (Please continue on a separate sheet if necessary but limit your submission to no more than two sides of A4)						

3. Do you have any knowledge or interest in culture, arts, leisure and health? Are you a current user of the services from Magna Vitae?
current user of the services from Magna Vitae?
4. Please provide below details or any training or professional qualifications relevant to the role.
5. Are you a member of a professional organisation? If yes, please state the organisation and membership level.

6. Are you a member or on the Committee of any other Charitable Trust, National Body or any other organisation? If so, please give details.					
7. Please detail your present and most recent employer.					
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8. Are you or have you ever been?					
The subject of an application for a disqualification order under the Companies Directors Disqualification Act 1986 or had such an order made against you? Yes $\square$ No $\square$					
Adjudicated bankrupt or been the subject of a petition for bankruptcy? Yes $\ \square$ No $\ \square$					
Entered into an individual voluntary arrangement under the Insolvency Act 1986 or any composition or moratorium on debts with creditors? Yes $\Box$ No $\Box$					
Been convicted of an indictable or other offence which is not spent? Yes $\square$ No $\square$					
Previously been removed from the trusteeship of a charity by the court or the Charity Commissioners? Yes $\ \square$ No $\ \square$					
If yes, please provide details below:					

Please give details of two referees (other than relatives) whom we can contact for a reference: Referee 1: Name: Address: Postcode: Telephone Number: Email Address: Their connection with you: May we contact them for a reference prior to interview (if you are shortlisted)? Yes  $\square$  No  $\square$ Referee 2: Name: Address: Postcode: Telephone Number: Email Address: Their connection with you: May we contact them for a reference prior to interview (if you are shortlisted)? Yes ☐ No ☐ Disability or Impairment Under the Equality Act 2010, a disabled person is considered to have a disability if he/she has a physical or mental impairment which has a long-term effect on their ability to carry out normal day-to-day activities. Do you consider yourself to have a disability, or an impairment that has the potential to be a disability? Yes □ No □ Prefer not to answer □ Please provide full details, and tell us of any adjustments that may be required for you to attend for interview, if selected:

F	Further Evidence:							

## **Data Protection**

The information provided on your application form will be used for recruitment and monitoring purposes. Personal data will be processed in line with the requirements of the Data Protection Act 1998 and the General Data Protection Regulation 2018.

I declare that the information provided in this application form is to the best of my knowledge correct and if I am appointed will form part of my agreement to sit on the Board of Trustee Directors.

Printed Name:	
Signed:	
Date:	
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Completed application forms should be sent to HR: Human Resources: Meridian Leisure Centre, Wood Lane, Louth, Lincolnshire, LN11 8SA

Email: HR@mvtlc.org

