**BEFORE COMPLETING THIS FORM PLEASE READ THE TRUSTEE CODE OF CONDUCT AND ROLE DESCRIPTION**

*All data will be held in the strictest of confidence in compliance with the Data Protection Act 1998 and the General Data Protection Regulation 2016.*

**PERSONAL DETAILS**

**Preferred Contact Number:**

**Forename:**

**Title:**

**Surname:**

**Address: *(including postcode)***

**Email:**

**INTEREST AND MOTIVATION**

Please explain why you would like to apply for the position of Trustee at the **Chrysalis Centre for Change**

Please describe below your understanding of the duties and liabilities of being a Trustee

**RELEVANT EXPERTISE**

The Board of Trustees as a whole would ideally possess the skills listed below. Individual candidates are not expected to possess all of these skills but rather be able demonstrate expertise in at least one.

Please mark the expertise you possess at the level you consider your knowledge or experience of those to be (1 = a little knowledge or experience, 5 = very knowledgeable or experienced)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Skill** | **1** | **2** | **3** | **4** | **5** |
| **Awareness of women’s Mental Health issues** | ❑ | ❑ | ❑ | ❑ | ❑ |
| **Business development/planning** | ❑ | ❑ | ❑ | ❑ | ❑ |
| **Conflict resolution** | ❑ | ❑ | ❑ | ❑ | ❑ |
| **Domestic Abuse Awareness** | ❑ | ❑ | ❑ | ❑ | ❑ |
| **Equality & Diversity** | ❑ | ❑ | ❑ | ❑ | ❑ |
| **Financial Management** | ❑ | ❑ | ❑ | ❑ | ❑ |
| **Fundraising** | ❑ | ❑ | ❑ | ❑ | ❑ |
| **Governance** | ❑ | ❑ | ❑ | ❑ | ❑ |
| **ICT** | ❑ | ❑ | ❑ | ❑ | ❑ |
| **Legal issues affecting Charities/Employment Law** | ❑ | ❑ | ❑ | ❑ | ❑ |
| **Personal Development** | ❑ | ❑ | ❑ | ❑ | ❑ |
| **Policy Development** | ❑ | ❑ | ❑ | ❑ | ❑ |
| **Public & Media Relations / Communication / Marketing** | ❑ | ❑ | ❑ | ❑ | ❑ |
| **Quality assurance** | ❑ | ❑ | ❑ | ❑ | ❑ |
| **Risk Management** | ❑ | ❑ | ❑ | ❑ | ❑ |
| **Serving the public interest** | ❑ | ❑ | ❑ | ❑ | ❑ |
| **Setting targets, monitoring and evaluating performance**  | ❑ | ❑ | ❑ | ❑ | ❑ |
| **Strategic Planning** | ❑ | ❑ | ❑ | ❑ | ❑ |
| **Team development** | ❑ | ❑ | ❑ | ❑ | ❑ |
| **Voluntary sector** | ❑ | ❑ | ❑ | ❑ | ❑ |

**Please choose 2 skills from the previous list and give an example of your knowledge/experience in these areas to demonstrate what you can bring to the Board of Trustees at CCC**

**Skill 1:**

**Skill 2:**

**EMPLOYMENT/VOLUNTARY HISTORY**

Please list below previous & current employment and/or voluntary positions or attach a current CV

Please describe below your understanding of the work undertaken at the **Chrysalis Centre for Change**

**Commitment:** Please describe below your understanding of the time and commitment required of being a Trustee and tell us about your availability for meetings (e.g. evenings only, weekends, specific days)

**Relations with Staff & Volunteers:** Please describe below your understanding of the importance of Trustees developing open working relationships with staff and volunteers who deliver the services at **CCC**

**Relations with Service Users:** Please describe below your understanding of the importance of Trustees developing an understanding of, and being accessible to, **CCC** service users

**Referee 1**

**REFERENCES**

**Please supply us with the names and contact details of two referees that we may contact**

**Referee 2**

**Referee 1**

**DECLARATION**

I declare that: (please delete as appropriate):

* I am / am not an undischarged bankrupt
* I have / have not previously been removed from Trusteeship of a Charity by a Court or the Charity Commission
* I am / am not under a disqualification order under the Company Directors’ Disqualification Act 1986
* I have / have not been convicted of an offence involving deception or dishonesty (unless the conviction is spent)
* I am / am not in the light of the above disqualified by the Charities Act 1993 (Section 72) from acting as a Charity Trustee.

I declare that the information I have given in support of my application is, to the best of my knowledge and belief, true and complete. I understand that if it is subsequently discovered that any statement is false or misleading, or that I have withheld relevant information my application may be disqualified or, if I have already been appointment that appointment may be revoked.

**Signed:**

**Date:**

Thank you for completing this form & for your interest in becoming a Trustee for the **Chrysalis Centre for Change.**

**Please return this application form by post to:**

Chairperson, Chrysalis Centre for Change, Peter Street Community St. Helens, Merseyside WA10 2EQ

**Or email:** chrysaliscentreforchange@gmail.com

**EQUAL OPPORTUNITY MONITORING**

**Chrysalis Centre for Change (CCC)** is an equal opportunity organisation. **CCC** want to ensure that no applicant receives less favourable treatment on the grounds of race, colour, nationality, marital status, sexuality, age, trades union activity, disability, political or religious belief, or is disadvantaged by conditions or requirements which cannot reasonably be shown to be justifiable.

**Monitoring: Trustee Applicant’s Form**

In order to ensure the successful development of this policy in relation to recruitment and selection, all applicants are requested to fill in the appropriate details as shown below.

**The information you supply will be treated as strictly confidential and will only be used for monitoring purposes. Copies will not be available to the interview panel.**

***1. Your ethnic origin*** *(Please tick the appropriate box.)*

***White:*** *British* ❑ *Irish* ❑ *Any other White background* ❑

***Mixed:*** *White & Black Caribbean* ❑ *White & Black African* ❑ *White & Asian* ❑

 *Any other mixed background* ❑

***Asian or Asian British:*** *Indian* ❑ *Pakistani* ❑ *Bangladeshi* ❑ *Other Asian background* ❑

***Black or Black British:*** *Caribbean* ❑ *African* ❑ *Any other Black background* ❑

***Chinese or other ethnic group*** *Chinese* ❑ *Other* ❑

**Prefer not to say** ❑

***2. Your marital status*** *(Please tick the appropriate box.)*

Married ❑ Single ❑ Civil / Live-In Partner ❑ Divorced ❑ Widowed ❑ Prefer not to say ❑

***3. Are you disabled?*** *(Please tick the appropriate box.)* Yes ❑ No ❑ Prefer not to say ❑

***4. Your culture, belief or religion?*** *(Please tick the appropriate box.)*

Atheist ❑ Buddhist ❑ Christian ❑ Hindu ❑ Jewish ❑ Muslim ❑ Sikh ❑

No culture, belief or religion ❑ Prefer not to say ❑

Any other culture, belief or religion, please state: ....................................................................................

***5. Your sexual orientation?*** *(Please tick the appropriate box.)*

Heterosexual ❑ Gay/Lesbian ❑ Bisexual ❑ Other ❑ Don’t Know ❑ Prefer not to say ❑

***6 Your gender?*** *(Please tick the appropriate box.)*

Male ❑ Female ❑ Other ❑ Don’t Know ❑ Prefer Not to Say ❑

**7. Have you ever identified as transgender?** Yes ❑ No ❑