Chrysalis Centre for Change

Supporting Positive Mental Health

TRUSTEE APPLICATION FORM

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 theProtection Act 1998 and the General Data Protection Regulation 2016.

PERSONAL DETAILS

Title:

Forename:

Surname:

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

Email:

Preferred Contact Number:

INTEREST AND MOTIVATION

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

EMPLOYMENT HISTORY

Please list below details of employment history including your current position and employer. You can attach a CV to this application form if you wish.

RELEVANT EXPERTISE

The Board of Trustees as a whole must possess the skills listed below. Candidates are not expected to possess all or any given number of skills.

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) Please given an example of your knowledge or experience of the relevant skill.

Skill	**1**	**2**	**3**	**4**	**5**
Awareness of women's Mental Health issues	❑	❑	❑	❑	❑
Example					
Business development/planning	❑	❑	❑	❑	❑
Example					
Conflict resolution	❑	❑	❑	❑	❑
Example					
Domestic Abuse Awareness	❑	❑	❑	❑	❑
Example					
Equality & Diversity	❑	❑	❑	❑	❑
Example					
Financial Management	❑	❑	❑	❑	❑
Example					

Fundraising	❑	❑	❑	❑	❑
Example					
Governance	❑	❑	❑	❑	❑
Example					
ICT	❑	❑	❑	❑	❑
Example					
Legal issues affecting Charities/Employment Law	❑	❑	❑	❑	❑
Example					
Personal Development	❑	❑	❑	❑	❑
Example					
Policy Development	❑	❑	❑	❑	❑
Example					
Public & Media Relations / Communication / Marketing	❑	❑	❑	❑	❑
Example					

Quality assurance	❑	❑	❑	❑	❑
Example					
Risk Management	❑	❑	❑	❑	❑
Example					
Serving the public interest	❑	❑	❑	❑	❑
Example					
Setting targets, monitoring and evaluating performance	❑	❑	❑	❑	❑
Example					
Strategic Planning	❑	❑	❑	❑	❑
Example					
Team development	❑	❑	❑	❑	❑
Example					
Voluntary sector	❑	❑	❑	❑	❑
Example					

Any other relevant skills
Example

Training & Development

Part of being a Trustee at **CCC** will involve attending relevant training and development days. Please describe your willingness and ability to commit to further training and development as part of your role. Please also highlight any areas in which you would be particularly interested in receiving training.

Understanding of the Chrysalis Centre for Change

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

Understanding of Trusteeship

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

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 the staff and volunteers who deliver the services on a daily basis 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

REFERENCES

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

Referee 1

Referee 2

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 application form and for your interest in becoming a Trustee of the Chrysalis Centre for Change (CCC).

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. Please indicate 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. Please state 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. What is 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 What is your sexual orientation? *(Please tick the appropriate box.)*

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

6 What is your gender? *(Please tick the appropriate box.)*

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

Have you ever identified as transgender? Yes ❑ No ❑