**Trustee Application Form**

|  |  |  |  |  |  |  |  |  |  |  |  |
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| **Personal Details** | | | | | | | | | | | |
| Name | | |  | | | | | | | | |
| Address | | |  | | | | | | | | |
| Telephone | | |  | | | | | | | | |
| Email | | |  | | | | | | | | |
|  | | |  | | | | | | | | |
| **Role applied for** | | | Chair | | | | | | | | |
|  | | |  | | | | | | | |  |
| **Relevant Experience and Interests**  With reference to the role details, have you any particular skills, interests or experience which would be relevant to the role?  e.g. working in a charity, financial management, accountancy, fundraising, managing staff, volunteering, working with homeless or vulnerable people, or life experience of housing and homelessness issues. | | | | | | | | | | | |
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| **Why would you like to become a trustee of CHAS?** | | | | | | | | | | | |
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| **How did you hear about the Trustee position at CHAS?** | | | | | | | | | | | |
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|  | | | | | | | | | | | |
| **References** | | | | | | | | | | | |
| Please give details of 2 people who know you well, who are not members of your family or household, and who could provide us with references: | | | | | | | | | | | |
| Name | |  | | | | Name | | | |  | |
| Address | |  | | | | Address | | | |  | |
|  | |  | |  | | | | | |  | |
| Email | |  | | | | Email | | | |  | |
| Telephone | |  | | | | Telephone | | | |  | |
| Relationship  to you | |  | | | | Relationship  to you | | | |  | |
|  | |  | |  | | | | | |  | |
|  | | | | | | | | | | | |
| **Emergency contact** | | | | | | | | | | | |
| Name | |  | | | Relationship  to you | | | |  | | |
| Telephone | |  | | |
|  | | | | |  | | |  | | | |
|  | | | | |  | | |  | | | |
| **Please sign to confirm that the above details are correct** | | | | | | | | | | | |
| SIGNED |  | | | | DATE | |  | | | | |
| *(If emailing, typing your name here is sufficient)* | | | | | | | | | | | |
| Please return this form by email to: admin@chasbristol.co.uk  Or by post to: CHAS (Bristol), P.O. Box 2219, Bristol BS6 9LG | | | | | | | | | | | |