



Women's Work(Derbyshire)Ltd

Application for Membership

Full Name:.....

Date of Birth:..... **Nationality**.....

Current Address:.....
.....
.....

Tel No(day):..... **Tel No: (eve):**.....

Email:.....

Please provide two references. One should be from someone who has known you at least 5 years (and is not a family member). A Criminal Records Bureau check will be required for every successful applicant.

Reference 1

Reference 2

Name:.....

Name.....

Address:.....

Address:.....

.....

.....

.....

.....

Telephone No:.....

Telephone No:.....

Relationship to you:

Relationship to you:

.....

.....

I am willing to stand as a candidate for the election to the Board of Trustees of Women's Work. I confirm that I am eligible to serve as a Company Director and Charity Trustee. If elected I am willing to make every reasonable effort to attend meetings (usually monthly). If I agree to serve on a sub- committee I will also attend relevant meetings. I confirm that I am willing to assist in project activities when possible. I understand that, if elected, I have a legal obligation to act honestly and responsibly and always in the best interests of Women's Work and its beneficiaries.

Signature.....

Date.....

All records are kept confidential and must be updated regularly. It is your responsibility to inform the Secretary of any changes to personal details.

For office use only:

Proof of ID: Y/N Document seen:.....

Satisfactory References? Y/N (If no state reason)

APPLICATION FOR MEMBERSHIP OF THE BOARD OF TRUSTEES

Please tell us about yourself below, including an outline of your skills and experience, and why you would like to serve on the Women's Work Management Committee.

Name: _____ Current Position (if appropriate) _____

Signature: _____ Date: _____

MEMBERSHIP OF THE MANAGEMENT BOARD

Job Description of Women's Work (Derbyshire) Ltd Trustees

(Note: Members of the Management Board are Trustees and Company Directors)

1. Trustees will support the Mission Statement, Values and Strategic objectives.
2. Trustees will be prepared to attend regularly at Women's Work Management Board meetings and an AGM each year and be aware that failure to attend three meetings consecutively will result in their place on the Board being reviewed.
3. Trustees will be welcome to attend other meetings or training sessions as invited.
4. Trustees will be responsible for the development and oversight of the policies of Women's Work and will accept corporate responsibility for these policies.
5. Trustees will act in accordance with Women's Work structures, principles.
6. Trustees should ensure they are not disqualified from becoming a trustee by Charity or Company law.

Your signature below confirms acceptance of the above conditions. Please keep a copy for your information.

I accept the conditions above.

Signature: _____

Name: _____

Date: _____

TRUSTEE DECLARATION

I declare that:

- I am over age 18

Y/N

- I do not have an unspent conviction for an offence involving deception or dishonesty or an offence involving physical or emotional harm to another person.

Y/N

- I am not an undischarged bankrupt

Y/N

- I have not previously been removed from trusteeship of a charity by a Court or the Charity Commissioners.

Y/N

- I am not under a disqualification order under the Company Directors Disqualification Act 1986

Y/N

- I am, in light of the above, not disqualified by the Charities Act 1993 (Section 72) from acting as a charity trustee.

Y/N

- I am not prohibited from occupying a 'registered position' under the Criminal Justice and Court Services Act 2000 (CJSA) and am willing for the organisation to obtain a Criminal Records Bureau disclosure about me.

Y/N

- I undertake to fulfil my responsibilities and duties as a Women's Work trustee in good faith and in accordance with the law and within Women's Work charitable objectives and to follow the Code of Conduct for Women's Work (Derbyshire) Ltd trustees.

Y/N

- I do not have any financial or other interests in conflict with those of Women's Work (either in person or through a connected* person) except those which I have formally notified in a conflict of interest statement. I will specifically notify any such interest at any meeting where trustees are required to make a decision which affects my interests, and will absent myself entirely from any decision on the matter and not vote on it.

Y/N

Signed (name of trustee):

Date:

***Connected Person** means a person entitled to receive any salary, fees or remuneration of any kind whatsoever in respect of services performed for Women's Work and who is the spouse, child or other close relative of a Women's Work trustee.