Trustee Application Form



Thank you for your offer to become a Trustee of Salisbury Foodbank. In order for us to process your application please would you answer the questions below. If you have any questions about this form, please contact chas@salisbury.foodbank.org.uk

Please note: Successful applicants will be required to complete a Charity Commission Trustee Eligibility Declaration

Title: Full Name: Address:					
Tel No Work: Mobile:					
Email:					
Occupation:					
Qualifications:					
Which of the following skills or experience could you bring to our Board?	Please indicate against each relevant area if this is your principal skill, by writing 'P', or a secondary skill where you have experience, by writing 'S'.				
		P/S		P/S	
	Managing a Team		Business Management		
	Financial / Accounting		Marketing / P.R.		
	Fundraising		Social Welfare		
	Health & Safety		Charity Law		
	HR		Knowledge of the local community		
	Other				
*If other, please specify:					

Please indicate why you want to become a trustee of Salisbury Foodbank and how you think your own skills and experience would enable you to fulfil this role (maximum 300 words please).
I can confirm that I am available for the time commitment as described in the information pack. Yes $\hfill\Box$ No $\hfill\Box$
Would you be willing to for us to apply for a DBS criminal record check, if required? Yes \hdots No \hdots
References (not family members please) References will only be taken up if you are shortlisted for the role.
Referee 1
Name:
Daytime tel. number or email address:
Relationship to you:
Referee 2 Name:
Daytime tel. number or email address:
Relationship to you:

useful to us			
bank?			
release them to a third party.			
a. I consent to the processing of the course of my trusteeship, if			
lbank.org.uk			
If you would prefer to post a copy of this form, please send it to:			