

Ref No.

1 Newfoundland Court, St Paul Street,
Off Newfoundland Street, Bristol BS2 8AN
Tel: 0117 924 4071 Fax: 0117 924 8816
Email: recruitment@solonswha.co.uk
Website: www.solonswha.co.uk



CONFIDENTIAL
APPLICATION FOR BOARD MEMBERSHIP

Position applied for:

1. PERSONAL DETAILS	
SURNAME:	
FIRST NAME(S):	
PREFERRED NAME (if different from first name):	
ADDRESS:	
POSTCODE:	
TEL NO. (day):	TEL NO. (evening):
MOBILE NO:	
EMAIL:	

If you are related to a Board Member or staff member of Solon South West, please give details:

If you have previously been employed by Solon SWHA, please give details of the position and the period of employment:

1. PERSONAL DETAILS (continued)

Please disclose any interests you may have relating to the work of Solon SWHA, in any business trading for profit in which you or a close relative is concerned.

Have you ever been convicted of a criminal offence (spent convictions as defined by the Rehabilitation of Offenders Act 1974 being specifically excluded)?

YES

NO

If yes, please give details. A conviction will not necessarily disqualify you from consideration:

DATA PROTECTION ACT 1998

You consent to Solon processing your personal data for administrative purposes and for the purpose of complying with applicable laws, including the Data Protection Act 1998, regulations and procedures.

DECLARATION

I declare that to the best of my knowledge and belief that information given on this application is true and correct. (If you are e-mailing your application and are selected for interview, you will be asked to sign on arrival.)

Signed:

Date:

CONFIDENTIAL

Ref No.

NOTES

- All personal details requested on this form are detached before short listing to ensure that you are only accessed on your ability to do the job
- CVs will not be accepted. The information provided on the following pages will be the basis on which candidates are selected for interview
- If you require a large print version of this form, please contact Central Services on 0117 924 4071

2. EMPLOYMENT HISTORY (in chronological order) Please explain briefly gaps in employment			
DATES		EMPLOYER	POSITION HELD
From	To	Name, Address & Business type	Include a brief, clear description of duties and responsibilities

3. DETAILS OF PROFESSIONAL QUALIFICATIONS AND/OR TRAINING RELEVANT TO THIS APPLICATION:

4. REFERENCES: Please give 1 referee who may be able to comment on your suitability for the position

Name:

Position:

Email:

Address:

5. REASONS FOR APPLICATION: Please give your reasons and motivation for being a Board Member of Solon SWHA

<p>6. SKILLS, KNOWLEDGE AND EXPERIENCE: Please explain how you meet the criteria of the person specification/competency framework by detailing the knowledge, skills and experience gained both within and outside formal employment, together with the qualities you could bring to the role.</p>
<p>7. The minimum requirement for Board members is to attend 6 evening meetings per year. There are also additional optional meetings Board members will be invited to. Would you be able to meet this minimum requirement?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>8. Would you be interested in Chairing the Association or one of its sub-committees should the opportunity arise in the future?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/> Undecided <input type="checkbox"/></p>
<p>9. If I am not successful in being selected for Board Membership with Solon SWHA I would like my detail to be circulated to other local housing associations</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>

Please return completed application form, marked 'Confidential' to:

*Central Services
Solon South West Housing Association
1 Newfoundland Court
St Paul Street
Bristol BS2 8AN*

or e-mail to: recruitment@solonswha.co.uk

Please complete and return the Equal Opportunities Monitoring Form separately in the pre-paid envelope provided, or return as a separate e-mail. Thank you.