

APPLICATION TO JOIN CROSSROADS' BOARD OF DIRECTORS

Mr Mrs Miss Ms other (please state)

Surname

Forename(s)

Date of birth

 / /

Address

(If this is a temporary address, please also give your usual home address)

Daytime contact telephone

E-mail

Telephone numbers

Home

Work

Mobile

Please tell us what interests you about joining Crossroads' Board of Directors?

Please tell us what experience and expertise you would bring to Crossroads' Board of Directors?
(please refer to the person specification)?

Are you or have you ever been a carer? Yes No

Do you know of any reason which would prevent you from becoming a company director, member of a management committee or a charity trustee, for example undischarged bankruptcy, unspent conviction for deception or dishonesty or previous removal as a company director, management committee member or charity trustee on these grounds?

Yes No

If yes, please specify below.

DECLARATION OF ELIGIBILITY AND COMMITMENT

I declare that:

- I am over the age of 18.
- I do not have an undischarged bankruptcy.
- I have not previously been removed from Trusteeship or Directorship of a charity by a court or the Charity Commission.
- I am not under a disqualification order under the Manx Companies Act 1996, Isle of Man Companies Act 2006 or the UK Company Directors Disqualification Act 1986.
- I have not been convicted of an offence involving deception or dishonesty (unless the conviction is spent).
- I am, in the light of the above, not disqualified by the UK Charities Act 2006 from acting as a charity Trustee.
- I undertake to fulfil my responsibilities and duties as a Non-Executive Director of Crossroads in good faith and in accordance with the law and within Crossroads' objectives, to which I am committed.
- I do not have any financial interests in conflict with those of Crossroads, either in person or through family or business connections, 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 personal interests, and I will absent myself entirely from any decision on the matter and not vote on it.

I declare that the information on this application form is, to the best of my knowledge, true and accurate.

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Signed

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Date