

Section 1 – Personal Details

Title: Mr Mrs Miss Ms Other _____

Surname: First Name:

Current Address:

Postcode:

Contact Number:

Email Address:

D.O.B: Age:

Gender: Male Female Other:

Marital Status:

Section 2 – Equal Opportunity

What is your nationality?

What is your ethnicity origin?

What is your religion or belief?

What is your sexual orientation?

Do they have a disability? Yes No

If yes, please describe:

Section 3 – Disclaimers

Do you smoke? Yes No Occasionally

Do you drink alcohol? Yes No Occasionally

Are you currently in or have been in rehab for alcoholism? Yes No

Do you use drugs? Yes No Occasionally

Are you currently in or have been in rehab for drugs? Yes No

Do you have any criminal convictions? Yes No

Please outline any convictions not considered spent under the Rehabilitation of Offenders Act

Date of Conviction	Offence	Length of Sentence

Are you on any medication? Yes No

Name of Medication	Dosage	Time Taken	Reason for Usage

Are you related to anyone currently serving on the Board of Trustees for Bethel Homeless Ministry which could cause a conflict of interest? Yes No

If yes, please state their name?

Section 4 – Position You Are Applying For

Trustee Positions	
Chair Trustee	
Vice Chair Trustee	
Treasury Trustee	
Trustee	

Section 5 – Why do you want to become a trustee for Bethel Homeless Ministry?

Section 6 – What experience and skills can you offer Bethel Homeless Ministry's charity that will support its' growth and development?

Section 7 – Declaration

To the best of my knowledge, the information within this form is true and accurate. I understand that if relevant information has not been disclosed or any information deemed false, Bethel Homeless Ministry reserves the right to discard my application form.

Full Name: _____

Signature: _____

Date: _____