

Bernhard Baron Care Home Trustee Application Form

Name:				
Home Address:				
Postcode:				
Home phone:		Mobile:		
Work phone:		Local Meeting:		
Email:				
Occupation:				
Qualifications:				
	Please indicate against each relevant area whether it is your principle skill 'P', or a secondary skill where you have some experience 'S'.			
Which of the following skills or experience could you bring to the Board?		P/S		P/S
	Human Resources		Business Management	
	Fundraising		Safeguarding	
	Marketing/PR		Financial/Accounting	
	Health & Safety		Project Management	
	Legal		Social Care	
	Charity Governance		Investment	

Please indicate why you want to become a trustee of Bernhard Baron Care Home and how you think your own skills and experience would enable you to fulfil the role of a Trustee as described in the Role Description.

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Please give details of two people who would be willing to provide a reference.	
Name:	Name:
Address:	Address:
Postcode:	Postcode:
Telephone:	Telephone:
Email:	Email:

Trustee applicant's declaration:

I declare that:

- I am over the age of 18.
- I am not an undischarged bankrupt.
- I have not previously been removed from trusteeship of a charity by a Court or the Charity Commission.
- I am not under a disqualification order under the Company Directors' Disqualification Act 1986.
- I have not been convicted of an offence involving deception or dishonesty (unless the conviction is spent).
- I have not entered a composition or arrangement with creditors, or have an individual voluntary arrangement and I am not on the Insolvency Service Register.
- I undertake to fulfil my responsibilities and duties as a trustee of Bernhard Baron Care Home in good faith and in accordance with the law and within Bernhard Baron Care Home's objectives, mission and code of conduct for trustees.
- I do not have any financial interests in conflict with those of Bernhard Baron Care Home (either in person or through family or business connections) except those that I will formally notify 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.
- I have read the Charity Commission guidance on Automatic Disqualification and this does not apply to me.
- I agree to undertaking an appropriate Disclosure and Barring Service check and I will share the results with Bernhard Baron Care Home.

Signature:	Date:
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