

IBS NETWORK

Application to be a Trustee.

APPLICANT INFORMATION			
Surname	First Name	Initial	Date
Street Address			
Town/City	County	Postcode	
Phone No	E-mail Address		
Position Applied for			
Are you a UK citizen?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If not, do you have a permit to work in the UK? YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever worked for a charity before?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, which one and when?
Do you have a criminal record?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain

EDUCATION/QUALIFICATIONS		
Secondary Education		Address
From	To	GCSEs/A-Levels
College/University		Address
From	To	Qualifications
College University		Address
From	To	Qualifications

Please outline the skills and experience you could offer the IBS Network if you were appointed as a trustee.

Please indicate why you wish to be a trustee.

Previous charity experience

EMPLOYMENT (CURRENT/PREVIOUS)		
Company		Phone No () E-mail
Address		Supervisor/ Line Manager
Job Title		
Responsibility		
From	To	Reason for Leaving (if relevant)
May we contact your previous employer for a reference? Yes No		
Company		Phone No () E-mail
Address		Supervisor/ Line Manager.
Job Title		
Responsibility		
From	To	Reason for Leaving

May we contact your previous employer for a reference? Yes No

DISCLAIMER AND SIGNATURE	
I certify that my answers are true and complete to the best of my knowledge. If this application leads to appointment, I understand that false or misleading information in my application or interview may result in my release.	
Signature	Date
Please return this form by E-mail to Dr Nick Read at nickwread@btinternet.com . By fax 01114 272 3253 Or by mail to Dr Nick Read, The IBS Network, Unit 1-12 SOAR works, 14 Knutton Road, Sheffield S5 9NU,	