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Chief Executive Officer: Suzanne Slavin BSc (Open)

APPLICATION FORM :- Trustee Application under Clause 13 of the Constitution

SECTION A

PERSONAL DETAILS	
Full Name:	
Address:	
Postcode:	
Telephone:	
Business:	
Home:	
Email:	

It is recognised by the Centre that some applicants may be applying to become Trustees for the first time and therefore may have limited experience. In such cases an applicant should outline why they want to become a Trustee in **Section C**.

SECTION C

[illegible]

Please state why you are applying for this post; refer to any knowledge, skills, experience or other factors which you consider relevant to this position.

[illegible]

CANDIDATES DECLARATION

I confirm that all information in this form is, to my knowledge, correct. I further declare that I am not a disqualified person
is terms of section 69 of the Charities and Trustees (Scotland) Act 2005

Signature..... Date.....

Office & Finance Manager
7 York Street
Ayr
KA8 8AN
Email: management@ayrhousingaidcentre.com

The information you give us in this form will be treated in the strictest confidence.

EQUAL OPPORTUNITIES MONITORING FORM

Ayr Housing Aid Centre SCIO operates an Equal Opportunities recruitment and selection policy which ensures that no applicant for the Board is treated less favourably than any other. For the policy to be effective, detailed monitoring of applications requires to be carried out to ensure that no candidate is discriminated against on the grounds of gender, race, colour, nationality, ethnic or national origins, marital status, disability, sexuality or age.

Your assistance would be appreciated in providing information which will be treated in the strictest confidence and will be used simply to provide a statistical profile of the applicants for the Board. The information will not be made available to any person who is involved in the selection process.

Thank you for your co-operation.

PLEASE TICK THE APPROPRIATE BOX

SEX	ETHNIC ORIGIN	AGE
Are You? Male <input style="width: 50px; height: 20px;" type="checkbox"/> Female <input style="width: 50px; height: 20px;" type="checkbox"/>	Are You? White <input style="width: 50px; height: 20px;" type="checkbox"/> Black – African <input style="width: 50px; height: 20px;" type="checkbox"/> Black – Caribbean <input style="width: 50px; height: 20px;" type="checkbox"/> Black – Other (please specify) <input style="width: 50px; height: 20px;" type="checkbox"/> Indian <input style="width: 50px; height: 20px;" type="checkbox"/> Bangladeshi <input style="width: 50px; height: 20px;" type="checkbox"/> Pakistani <input style="width: 50px; height: 20px;" type="checkbox"/> Chinese <input style="width: 50px; height: 20px;" type="checkbox"/> Other (please specify) <input style="width: 50px; height: 20px;" type="checkbox"/> 	Are You? Aged Under 21 years <input style="width: 50px; height: 20px;" type="checkbox"/> 21 – 30 <input style="width: 50px; height: 20px;" type="checkbox"/> 31 – 40 <input style="width: 50px; height: 20px;" type="checkbox"/> 41 – 50 <input style="width: 50px; height: 20px;" type="checkbox"/> 51 – 60 <input style="width: 50px; height: 20px;" type="checkbox"/> Over 60 <input style="width: 50px; height: 20px;" type="checkbox"/>
MARITAL STATUS Are You? Married <input style="width: 50px; height: 20px;" type="checkbox"/> Not Married <input style="width: 50px; height: 20px;" type="checkbox"/>		DISABILITY Are You? Registered Disabled <input style="width: 50px; height: 20px;" type="checkbox"/> Disabled (not Registered) <input style="width: 50px; height: 20px;" type="checkbox"/> Not Disabled <input style="width: 50px; height: 20px;" type="checkbox"/>