



Solace Women's Aid is an independent charity providing a range of refuge, support and holistic services for women and children enabling them to live their lives free from domestic abuse

Board of Trustees Application Form

Please complete form in black ink and return to **The Administrator** at **136 Royal College Street, London NW1 0TA** or ring for more details on 020 7428 7656
Email: - info@solacewomensaid.org or for more information on Solace Women's Aid visit www.solacewomensaid.org

Family name/surname: -----

Forename(s)/given name(s): -----

Address: -----

----- Postcode: -----

Telephone – Home: ----- Mobile: -----

Email: -----

What is your preferred form of communication? (Please mark with x)

Post		Email		Phone	
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YOUR PAID WORK OR VOLUNTEER WORK EXPERIENCE

(Please give details of your present or last position)

Employer/Organisation: -----

Address: -----

From: (month, year) -----To: (month, year) -----

Summary of key responsibilities: -----

Skills Audit

Please indicate which skills you have that you could contribute to the Board of Trustees:-
(Please mark with an x as many as you like)

Building/Maintenance		Campaigning	
Child Protection		Children's Services	
Commissioning/Tendering		Community Development	
Conflict Resolution		Domestic Violence Sector	
Education		Equality & Diversity	
Financial Management		Fundraising	
Governance and Risk		Health & Safety	
Housing		Human Resources	
Information Technology		Legal - Charity Law	
Legal - Employment law		Legal - Family Law	
Marketing & PR		Policy Formation	
Protection of Vulnerable Adults		Quality Performance Management	
Strategic Planning		Other...	

Board Sub-groups

Please indicate which sub-group you would be interested in volunteering in:-
(Please mark with an x as many as you like)

Finance		Human Resources	
PR & Fundraising		Policy & Development	
Service Users			

Do you have any medical conditions or disabilities that could affect your role as a Trustee? A disability or health problem will not prevent full consideration of your application. We can discuss any access needs you may have at the interview stage

Yes/No If YES please give details:

We recognise and welcome our responsibility to remove any barriers for disabled people. We are committed to making reasonable adjustments wherever possible and it would be helpful to know your needs in order for us to do this.

Declaration of Criminal Record

Have you ever been convicted of a criminal offence, cautioned or given a bind over?

Yes/No

If yes, please give details:

Date	Offence	Sentence

Rehabilitation of Offenders Act 1974 - Volunteering with Solace Women’s Aid as a Trustee may involve contact with vulnerable children, young people and adults, therefore all spent offences must be disclosed.

REFEREES

References will be taken up once an offer for a Volunteer Trustee role has been made and verbally accepted. Please give TWO referees and indicate in what capacity they are known to you. At least one should be from **EITHER** a professional (previous job or voluntary work) **OR** from education i.e. school, college etc. **Please do not use referees who are related to you.**

Name:-----	Name:-----
Organisation: -----	Organisation: -----
Address: -----	Address: -----
-----	-----
Telephone no:-----	Telephone no:-----
Email Address: -----	Email Address: -----
Relationship: -----	Relationship: -----

In accordance with the Data Protection Act 1998 I give my consent for the information contained in this form to be processed in accordance with Solace Women’s Aid volunteer policy for the purposes of recruitment. I understand that if offered a position on the Board of Trustees, this application form will be held by Personnel for the duration of my volunteer work and destroyed in line with the Solace Women’s Aids Data Protection Policy.

The information given is correct to the best of my knowledge. I understand that because of the sensitive nature of volunteer duties a CRB (Criminal Records Bureau) check will be required.

Signature: _____ Date: _____

EQUAL OPPORTUNITIES SWA BOARD OF TRUSTEE - MONITORING FORM

The information requested is confidential and anonymous and will be used purely for monitoring purposes. It will not be used as part of the selection or recruitment procedure.

The form will be separated on receipt of your application. The recruitment panel will not see this form. Do not put your name on this form.

If you do not wish to answer any of the questions, please leave the space blank.

Which Solace Women's Aid service(s) are you interested in Volunteering for:	Board Member	
<p style="text-align: center;"><u>ETHNIC ORIGIN</u></p> <p>The object of ethnic monitoring is to ensure that racial discrimination does not take place. Ethnic origin refers to members of an ethnic group who share the same cultural identity. This does not mean country of birth or nationality.</p> <p style="text-align: center;">I would describe my ethnic origin as (Please mark with an x):</p>		
Asian	Bangladeshi	Black British
Caribbean	Chinese	East African
Indian	Irish	Middle East
Other African	Pakistani	Somali
Vietnamese	White British	Other
<p style="text-align: center;"><u>SEXUALITY</u></p> <p>I would describe my sexuality as (Please mark with an x):</p>		
Bisexual	Heterosexual (Straight)	Lesbian
Unsure	Prefer not to say	
<p style="text-align: center;"><u>DISABILITY</u></p> <p>A disability or health problem does not preclude full consideration for a voluntary position within Solace Women's Aid.</p> <p>Do you consider yourself to have a disability?</p>		
YES	NO	Prefer not to say
<p style="text-align: center;"><u>PERSONAL EXPERIENCE</u></p> <p>Have you personally been affected, as an adult, by Domestic Violence?</p>		
YES	NO	Prefer not to say
<p>Have you personally been affected, as a child, by Domestic Violence?</p>		
YES	NO	Prefer not to say
<p>Have you ever accessed a Domestic Violence Service?</p>		
YES	NO	Prefer not to say
<p style="text-align: center;"><u>WHERE DID YOU HEAR ABOUT THIS VOLUNTEER OPPORTUNITY?</u></p> <p>Solace Women's Aid wishes to make sure that all opportunities are advertised as widely as possible. Could you please say how you heard about volunteering at Solace?</p>		

Thank you very much for your co-operation in completing this form