**APPLICATION FORM FOR MEMBERSHIP OF THE BOARD OF MANAGEMENT**

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| **Full Name:**  **(Block Capitals)** |  | | |
| **Address:**  **Postcode:** |  | | |
| **Telephone:** | **Home:** | **Work:** | **Mobile:** |
| **E-mail Address:** |  | | |
| **Date of Birth:** |  | | |

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| **PRESENT OR MOST RECENT OCCUPATION** |  |

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| **EMPLOYMENT HISTORY (Brief details of name of employer /positions held)** |
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| **SKILLS, KNOWLEDGE, QUALIFICATIONS AND EXPERIENCE THAT YOU WILL BRING TO THE BOARD (Please provide brief details)** |
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| **VOLUNTARY WORK (Brief details of any unpaid work carried out) INCLUDING ANY POSITIONS OF PUBLIC RESPONSIBILITY HELD (e.g. Community Council, etc)** |
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| **WHAT ATTRACTS YOU TO SERVICE AS A BOARD MEMBER OF THE ASSOCIATION?** |
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| **Personal Data** |
| In accordance with the General Data Protection Regulations (GDPR), Lochaber Housing Association is committed to being transparent on how it handles your personal information, to protect the privacy and security of your personal information and to meet our data protection obligations for all board member. A copy of our Board Member privacy notice is included within your application pack. |

**Signed:**

**Date:**

**By signing this form I confirm I meet the Board member eligibility criteria.**

Thank you for completing the form. Please return to:

Lochaber Housing Association Ltd, 101 High Street, Fort William PH33 6DG

Telephone: 01397 702530 Fax: 01397 704141

Email: [info@lochaberhousing.org.uk](mailto:info@lochaberhousing.org.uk) Website: [www.lochaberhousing.org.uk](http://www.lochaberhousing.org.uk)

**A Scottish Charity (No SCO 30951)**

**Registered as a Society under the Co-operative and Community Benefits Act 2014**

**Scottish Housing Regulator Registered No. 151**