# Environmental Rights Centre for Scotland (ERCS)

# Trustee Application Form

If you need this form in a different format that is more accessible to you, please telephone us on 0131 358 0038 or email admin@ercs.scot.

Your details

|  |  |
| --- | --- |
| Name |  |
| Address |  |
| Postcode |  |
| Contact phone number |  |
| Email |  |

Personal history and experience

Briefly summarise relevant personal history and experience e.g. employment, volunteering experience.

|  |
| --- |
|  |

Relevant knowledge, skills and abilities

Please state in no more than 250 words what relevant knowledge, skills and abilities you could contribute as a Trustee to the Environmental Rights Centre for Scotland.

|  |
| --- |
|  |

Becoming a trustee

Why does becoming a trustee interest you, and in what way would you hope to progress ERCS’s purpose and mission? Please also indicate what time commitment you could give to this role.

|  |
| --- |
|  |

The experience of volunteering should also give something back to the volunteer. What would you hope to gain from becoming a trustee?

|  |
| --- |
|  |

Conflict of interest

Are you aware of any possible conflict of interest which might arise personally in relation to your employment or in relation to your connections with any individuals or organisations as a trustee?

**Yes** [ ]  **No** [ ]

If yes, please give details below.

*NB: Conflicts of interest are not normally a barrier to appointment as long as they are appropriately managed and/or resolved.*

|  |
| --- |
|  |

Referees whom we can contact

Please give details of two people who may be approached for a reference and who can comment on your suitability to become a trustee. *NB: Relatives are not acceptable as referees.*

**1st Referee’s Name 2nd Referee’s Name**

|  |
| --- |
|  |

|  |
| --- |
|  |

**Position held & relationship to you Position held & relationship to you**

|  |
| --- |
|  |

|  |
| --- |
|  |

**Organisation name & address Organisation name & address**

|  |
| --- |
|  |

|  |
| --- |
|  |

**Email address Email address**

|  |
| --- |
|  |

|  |
| --- |
|  |

**Telephone Telephone**

|  |
| --- |
|  |

|  |
| --- |
|  |

Declaration

I confirm that the information contained in this application form is correct to the best of my knowledge.

By completing your name below and emailing the application form, this will be accepted as your signature.

Name ………………………………………………………………….. Date ……………………

**Please email this application form by the closing date to Shivali Fifield, ERCS Chief Officer:** **sfifield@ercs.scot****.**