**Trustee Member Application**

**This form is to apply for a voluntary role at SARAC to support on our board of trustees, not for face-to-face counselling, or helpline support.**

**Personal Details:**

Please tick to confirm that I am 21 and above:

|  |  |
| --- | --- |
| Name: |  |
| Preferred Name: |  |
| Preferred Pronouns: |  |
| Address: |  |
| Postcode: |  |
| Contact Number: |  |
| Email Address: |  |

**Qualifications and Training**

(Only enter qualifications/training that are relevant to this role)

|  |  |  |
| --- | --- | --- |
| Qualification/Training | School/University/Trainer | Dates (to/from) |
|  |  |  |

**Relevant skills, experience and abilities**

|  |
| --- |
| Can you describe what motivated you to apply to volunteer with SARAC? |
| Can you tell us what existing awareness you have about sexual abuse and/or trauma? |
| Having considered the role description and requirements of SARAC, can you describe the skills and abilities you have that are relevant to this role? |

|  |  |
| --- | --- |
| Can you explain any previous experience which might be relevant to this role and what you feel you have to offer to the role? | |
| Why do you think promoting equity, diversity and inclusion is important in this role? |

**Work and volunteer experience** – Please document any previous work experience, including voluntary roles in this table

|  |  |
| --- | --- |
| **Organisation** | **Title/Role – length of time** |
|  |  |

**Supporting Information** – Please use this space for any additional information that you would like to share including any accessibility requirements.

|  |
| --- |
|  |

**Referees** – Please supply two referees whom we can contact if you are successful in applying for this role. Reference checks are always carried out.

**Referee 1**

|  |  |
| --- | --- |
| Name |  |
| Relationship to you |  |
| Address |  |
| Phone number |  |
| Email address |  |

**Referee 2**

|  |  |
| --- | --- |
| Name |  |
| Relationship to you |  |
| Address |  |
| Phone number |  |
| Email address |  |

**The selection process will include seeking an enhanced disclosure DBS, which may include the child barred list, all expenses of which are met by sarac.**

If you have previous or current, spent or unspent convictions or warnings please use the space below to give brief details:

I have no history of criminal convictions 🞎

|  |
| --- |
|  |

**DECLARATION**

**I declare that, to the best of my knowledge, the information on this application form is true.**

|  |  |
| --- | --- |
| **Signed** | **Date** |

***I understand that if I provide false information, my application will be disqualified or if discovered after my appointment, I realise I could be dismissed.***

**FEEDBACK**

At SARAC, we value your feedback and continuously strive to enhance our interview process and overall experience for applicants. Your input is invaluable in helping us create a more inclusive and positive environment. Please send your feedback to [edi@sarac.org.uk](mailto:edi@sarac.org.uk) or write your answers below.

Thank you for helping us improve!

1. Was the application form easy to navigate and complete? Yes/No
2. Did you find the information provided correct and helpful? Yes/No
3. Is there anything specific that could be improved in the recruitment process?

|  |
| --- |
|  |

**Please see next page for Equality and Diversity Monitoring Form**

**Equality and Diversity Monitoring Form**

Thank you for applying to SARAC. To help us ensure equal opportunities for all applicants and monitor the diversity of our recruitment process, we kindly request that you complete the following optional questions. The information provided will be used for monitoring purposes only and will not affect your application in any way.

|  |  |
| --- | --- |
| **Age**:   * 18-24 * 25-34 * 35-44 * 45-54 * 55-64 * 65 or over * Prefer Not To Say | **Gender Identity**:   * + Cisgender Male   + Cisgender Female   + Transgender Male   + Transgender Female   + Non-Binary   + Transgender Non-Binary   + Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   + Prefer Not To Say |
| **Ethnicity**:   * White British * White Irish * Any Other White Background * Black/African/Caribbean/Black British * Asian/Asian British * Mixed/Multiple ethnic groups * Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ * Prefer Not To Say | **Sexual Orientation:**   * + Lesbian   + Gay   + Bisexual   + Heterosexual   + Pansexual   + Asexual   + Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   + Prefer not to say |
| **Disability:**  Do you consider yourself to have a disability?   * Yes * No * Not Sure * Prefer Not To Say | **Religion or Belief:**   * + Christian   + Muslim   + Hindu   + Jewish   + Sikh   + Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   + None   + Prefer not to say |

Thank you for taking the time to complete this form. Your cooperation in providing this information is greatly appreciated as we strive to promote equality and diversity within SARAC. If you have any questions or concerns regarding this form, please contact edi@sarac.org.uk.