

Application Form

(Please type or complete in black ink)



**Disability
Equality
Scotland**

Working towards Equality, Inclusion and
Participation for Disabled People in Scotland

Post Applied for: Convener

Closing Date: 8 March 2022

1. Personal Details

Surname:

First name:

Address:

Postcode:

Home Telephone Number:

Mobile Number:

Email:

2. Employment / Volunteering

Current Position:

Current Employer / Organisation:

Work Phone Number:

What other volunteering commitments do you currently have?

Suite 204B, The Pentagon Centre, 36 Washington Street, Glasgow G3 8AZ
Registered in Scotland as a Company Ltd by Guarantee with Charitable Status
0141 370 0968 | admin@disabilityequality.scot | www.disabilityequality.scot

Registered Scotland Charity Number: SCO 31893 Company Number: SC 243392



3. Experience and Skills

Please tick the areas of expertise/contribution you feel you can make to further the mission of Disability Equality Scotland:

(Please attach your CV detailing your relevant experience to this position.)

- Credible spokesperson
- Governance
- The Equality Act 2010
- Access Audits
- Financial, especially charity accounting
- Equal Opportunities
- Fundraising
- Legal (charity, company, employment, Health and Safety)
- Management including leadership, business, rules of engagement, encouraging democracy, volunteering
- Marketing
- Media / PR
- Organisational development, including change management
- Performance Monitoring and evaluation
- Policy Implementation
- Political and parliamentary



Please list here any other additional skills / expertise you can contribute:

4. Boards and Committees

Please list below any boards or committees you serve on or have served on:

Organisation:

Role/Title:

Date of Service:

Organisation:

Role/Title:

Date of Service:

Organisation:

Role/Title:

Date of Service:

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5. About You

Do you have a disability or long-term health condition?

Yes No

What experience do you have working with disabled people?

Why are you interested in serving as Convener for Disability Equality Scotland?

How do you feel Disability Equality Scotland would benefit from your involvement on the Board?



Please share any other information you feel important for consideration of your application to serve as a Disability Equality Scotland Board member:

6. Protection of Vulnerable Groups (PVG)

The successful candidate will be subject to membership of the Protection of Vulnerable Groups Scheme. Confirmation of appointment will be conditional on the satisfactory outcome of this process

7. Guaranteed Interview Scheme

Disability Equality Scotland will offer a guaranteed interview to candidates with a disability who meet the criteria for this post.

Do you wish to be considered for a guaranteed interview?

Yes No

Do you have any support needs which we should be aware of?

Yes No

If yes, please provide details of any assistance you require.

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8. Agreement

By signing below, I agree that the information I have provided is true and correct. Additionally, my signature represents my agreement to the following statements:

- I understand and agree to Disability Equality Scotland's Board of Directors Expectations;
- I agree to abide to the Policies, Procedures and Bylaws of Disability Equality Scotland's Board;
- and I understand that if conflicts prevent me from performing the rules and expectations as a Board Member, I may be removed from the Board by a majority vote.

Full Name:

Signed:

Date:

Thank you very much for applying.

For Board Use only:

- | | | | | |
|--------------------------|---|--------------------------|----------|-------|
| <input type="checkbox"/> | Nominee interviewed by Board of Directors | Date: | | |
| <input type="checkbox"/> | Nominee proposed to the Board | Date: | | |
| <input type="checkbox"/> | Elected | <input type="checkbox"/> | Rejected | Date: |

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