

**SLOUGH BOROUGH COUNCIL
AUDIT AND CORPORATE GOVERNANCE COMMITTEE
APPLICATION TO SERVE AS AN INDEPENDENT CO-OPTED MEMBER
(Please type or use black ink)**

Name:

Address:

.....

.....Post Code:

Telephone: Home:Work (if available):

Mobile Tel No:E-mail address:

Personal Details

(Please note these details will be treated as confidential and will only be made available to those persons selected to appoint the Independent Members to serve on the Committee.)

Occupation (if any)

Place of work (if not a Slough resident)

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Formal Qualifications (if any)

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Equalities Monitoring. It would be helpful for us to know about your background so we can check that we are meeting the needs of the whole community. Please complete and return the attached equalities monitoring form

1) Are you a member of any political party or do you have any strong political affiliation?

Yes/No

2) Have you since **1ST May 2012** been a Member or Officer of Slough Borough Council?

Yes/No

3) Do you have any professional, personal, contractual or other relationship with the Council, any elected Councillor or with any Officer of Slough Borough Council?

Yes/No

4) Are you employed or otherwise connected with any organisation which receives grant aid or other funding from Slough Borough Council?

Yes/No

Availability to attend Committee/Sub-Committee Meetings

Please indicate below any factors which would limit your availability to attend meetings which are predominately held in the evening.

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References

Please give below the names and addresses of two persons who would be willing to act as personal referees in respect of your application.

1..... 2.....
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Day time Tel. No: Day time Tel. No:

E-mail: E-mail:

Occupation: Occupation:

Capacity known to you: Capacity known to you:

I confirm that the above information is true and accurate.

Signed:.....

Dated:.....

Please return this form, in the envelope provided, to:-

**Shabana Kauser
Democratic Services
St Martin's Place
51 Bath Road
Slough SL1 3UF**

Or email to shabana.kauser@slough.gov.uk