A group of people playing hockey

Description automatically generated with medium confidence

**Expression of Interest for:**

**Appointment of Directors**

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| **Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Tel: (daytime) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **e-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**    **Confidentiality**  Applications will be treated in strict confidence. All enquires, applications and all aspects of the proceedings are treated as strictly confidential and are not disclosed to anyone, outside those directly involved in that aspect of the process.  **Data Protection**  In accordance with Data Protection Acts 1988 to 2018 and GDPR, your application may be retained by Le Cheile Mentoring as per our Data Retention Policy.  **Which of the three roles are you expressing an interesting in applying to be a member of the Board of**  **Le Chéile**  **A person with HR expertise**  **A person with Communications and Marketing skills**  **A person with business/strategy/governance expertise.**    **Please set out how you meet the criteria for the relevant role you are applying for?** |

**Please indicate your relevant experience in the following pages.**

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| **1. Are you currently or have you previously served as a member of a Board or Committee?**  **(Please provide details)** |
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| **2. If yes, how many terms are you currently serving/or did you serve and what is/was the duration?** |
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| **3. Have you held any formal role on a Board or Committee, for example, Chairperson, Secretary or Treasurer?** |
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| **4. Do you currently have, or have you previously had any experience as a volunteer in your community or other communities?**  **(Please provide details)** |
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| **5. Are you aware of any potential conflicts of interest that may arise if you were to be appointed to the board of Le Cheile Mentoring?** |
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| **6. Please indicate your knowledge/experience of youth justice/work with young people/mentoring if any?** |

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| **7. If you have any additional relevant information in support of your expression of interest that is not covered in your answers above, please outline the details below:** |
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**Access Needs**

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| *Please list any special requirements you may have.* |

**Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**