

Shetland Merger Project

Application for the position of Board Member

Personal Details			
E-mail Address			
Initials		Surname	
Home Address			
Town/City			
Country			
Postcode		Home Phone No.	
Mobile Phone No.		Work Phone No.	
How did you learn of the position?			

Screening Questions
<p>Are you a member of the Protecting Vulnerable Groups (PVG) Scheme?</p> <p>YES / NO (delete as applicable)</p> <p>Please confirm your 16-digit scheme membership number:</p> <p>Please confirm the type of regulated work you have been checked for:</p> <p>ADULTS / CHILDREN / BOTH</p> <p>If you are a preferred candidate for the position, you will be required to join the PVG Scheme.</p>

Declaration		
<p>Important - please note that by submitting your completed application you're declaring:</p> <ul style="list-style-type: none">○ That the information provided is, to the best of your knowledge and belief, true and complete○ That you are able to meet the time commitment required of the role○ That you agree to apply and work within the Principles of Public Life in Scotland○ That you agree to be bound by the Board Members' Code of Conduct and other relevant Legislative or Regulatory Framework as is required by the Board of Management○ That you have no unmanageable conflict of interests in respect of the appointment○ That you are aware of the terms of disqualification and that you are not disqualified from taking up a public appointment. <p>If you give any information which you know is false, or if you withhold relevant information, this may lead to your application being rejected.</p> <table border="1"><tr><td>Signature</td><td>Date</td></tr></table>	Signature	Date
Signature	Date	

Please complete this form using Word and email to shetlandrecruitment@uhi.ac.uk

Applications must be returned by Friday 10th May 2019

Please provide short statements which demonstrate that you have the general skills and personal qualities under the following headings

Ability to work effectively in a team setting

Ability to critically examine proposals and their supporting analysis

Constructive and supportive challenge - you will need to be able to challenge without causing conflict

Communicating effectively

Professional Skills

Please indicate with an 'X' the areas of expertise that you could bring to the Board

	Have some knowledge	Good current hands-on experience	Expert in this area	State any relevant qualifications
Academic research				
Administration (charity, company, H&S, etc)				
Campaigning				
Change				
Community Affiliation				
Conflict Resolution				
Customer/Membership Care				
Development				
Education (Further, Higher or School)				
Equality & Diversity				
Financial (preparing/monitoring budgets, ability to read and understand management and annual accounts, etc)				
Fundraising (all sources)				
General Strategic Planning and Training (incl. evaluation)				
Governance				
Knowledge of College/University Sector				
Human Resources				
Information Technology				
Knowledge of the community				
Legal				
Management (incl. leadership, business, rules of engagement, encouraging democracy, volunteering)				
Management, Restructuring and Organisational Development				
Marketing (incl. events)				
Media/PR				
Networks/Alliances				
Policy Implementation				
Property, Estates and Infrastructure				
Risk Management				
Training				
Other (please give details)_				

Knowledge and experience

Provide evidence of how you meet the Knowledge and Experience listed within the Skills Requirements

Additional information

Please use this space to give any other relevant information to support your application

Data Protection - The information you supply will be processed in accordance with the provisions of the Data Protection Act 1998 (the Act) and will be used solely for the purposes of recruitment and personnel administration. The data supplied will not otherwise be copied or transferred to any person. If your application is unsuccessful we will retain the information you supply for 12 months and then delete it.

For any queries or concerns about how your personal data is being processed you can contact the relevant Data Protection Officer at dataprotectionofficer@uhi.ac.uk.

Equal Opportunities Monitoring Form

The new merged college in Shetland is committed to a policy of equal opportunities and seeks to ensure that no individual is discriminated against on the grounds of the protected characteristics of gender, race, religion or belief, sexual orientation, age, disability, maternity and pregnancy, marriage and civil partnership and gender reassignment.

To assist in monitoring the policy, and for the purpose of complying with the specific duties of The Equality Act 2010, it would be helpful if you could answer the following questions. **The information is not seen by the Selection Panel and will not be used to assess your suitability for appointment.** The information will be kept in strictest confidence and in compliance with the Data Protection Act 1998 and used for statistical monitoring purposes only.

Name:	
Position applied for:	
Date of birth:	

Age (please tick)

<input type="checkbox"/>	16-24 years old	<input type="checkbox"/>	25-34 years old	<input type="checkbox"/>
<input type="checkbox"/>	35-44 years old	<input type="checkbox"/>	45-54 years old	<input type="checkbox"/>
<input type="checkbox"/>	55-64 years old	<input type="checkbox"/>	65 + years old	<input type="checkbox"/>
<input type="checkbox"/>	Prefer not to say	<input type="checkbox"/>		<input type="checkbox"/>

Gender (please tick):

What is your gender identity?				
<input type="checkbox"/>	Male (including trans man)	<input type="checkbox"/>	Female (including trans women)	<input type="checkbox"/>
<input type="checkbox"/>	Other gender identity	<input type="checkbox"/>	Prefer not to say	<input type="checkbox"/>
Have you ever identified as being a transgender person?				
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
<input type="checkbox"/>	Prefer not to say	<input type="checkbox"/>		<input type="checkbox"/>

Relationship Status (please tick)

<input type="checkbox"/>	Co-habiting	<input type="checkbox"/>	Married	<input type="checkbox"/>
<input type="checkbox"/>	Civil Partnership	<input type="checkbox"/>	Separated or Divorced	<input type="checkbox"/>
<input type="checkbox"/>	Single	<input type="checkbox"/>	Widowed	<input type="checkbox"/>
<input type="checkbox"/>	Prefer not to say	<input type="checkbox"/>		<input type="checkbox"/>

Sexual Orientation (please tick):

<input type="checkbox"/>	Bisexual	<input type="checkbox"/>	Gay Man	<input type="checkbox"/>
<input type="checkbox"/>	Heterosexual/Straight	<input type="checkbox"/>	Gay Woman/Lesbian	<input type="checkbox"/>
<input type="checkbox"/>	Other (please specific below)	<input type="checkbox"/>	Prefer not to say	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>

Ethnic Origin (please tick):

A	Asian			
	Bangladeshi	<input type="checkbox"/>	Chinese	<input type="checkbox"/>
	Indian	<input type="checkbox"/>	Pakistani	<input type="checkbox"/>
	Any other Asian background (please specify)			
B	Black			
	African	<input type="checkbox"/>	Caribbean	<input type="checkbox"/>
	Any other Black background (please specify)			
C	Mixed			
	Any other mixed background (please specify)			
D	White			
	English	<input type="checkbox"/>	Irish	<input type="checkbox"/>
	Scottish	<input type="checkbox"/>	Welsh	<input type="checkbox"/>
	Any other White background (please specify)			
E	Other			
	Any other background (please specify)			
F	Prefer not to say			
	Prefer not to say	<input type="checkbox"/>		<input type="checkbox"/>

Religion or Belief (please tick):

	Buddhist	<input type="checkbox"/>	Christian	<input type="checkbox"/>
	Hindu	<input type="checkbox"/>	Jewish	<input type="checkbox"/>
	Muslim	<input type="checkbox"/>	No Religion/Belief	<input type="checkbox"/>
	Prefer not to say	<input type="checkbox"/>		<input type="checkbox"/>
	Any other religion			

Disability (please tick):

	Do you have a disability?	<input type="checkbox"/>		<input type="checkbox"/>
	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
	Prefer not to say	<input type="checkbox"/>		<input type="checkbox"/>