

Student Trustee Application Form

Please email president@cusu.cam.ac.uk or submit by hand to Reception (FAO Evie Aspinall), the Students’ Unions’ Building, 17 Mill Lane, Cambridge, CB2 1RX.

If you have questions or are unsure about anything at all, please email in advance of the deadline.

**Deadline: 5pm, Friday 10th May 2019.**

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| Name:  | College:  |
| Course:  | Year/Level: |

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| Term-time Address: |
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| Crsid:  |
| Mobile Number:  |
| Preferred email:  |

DATA CONSENT

The information you provide, along with any requested attachments, will be used to process your application. It will not be passed to third parties or used for other purposes than those required for trustee selection and legal precedent. If you are successful, we will keep your form. If you are unsuccessful, we will destroy it six months after the close of this trustee selection process. Security procedures are in place for protecting your data in accordance with the principles of the Data Protection Act 1998. Your details may be stored electronically in a password-protected system and/or as paper copies in secure storage. Please read the statements below and then sign and date to confirm your acceptance of them.

Declaration

I declare that:

* **I am a member of CUSU (i.e. a current student of the University) and will be until the end of term, Easter 2020**.
* I am over the age of 18.
* I am not:
	+ An undischarged bankrupt.
	+ Someone previously removed from trusteeship of a charity by a Court or the Charity Commission.
	+ Under a disqualification order under the Company Directors’ Disqualification Act 1986.
	+ Someone previously convicted of an offence involving deception or dishonesty (unless the conviction is spent).
* I am, in the light of the above, not disqualified from acting as a charity trustee.
* I understand that as a trustee of CUSU I will be excluded from employment by CUSU and its subsidiary companies.

I further declare that:

* I have read the above Data Consent paragraph, and I understand and accept how CUSU will use and store my personal data.
* I confirm that the information I give in my trustee application and any supporting documents is correct and complete.
* I understand that failure to disclose any relevant information or the provision of false information may lead to a removal of any appointment to trusteeship approved.
* I understand that CUSU may check all or any of the information provided as part of my application or given in references.

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| Signed: | Date:  |
| *See overleaf of additional sections of the application form to be completed* |
| ***What do you see as the role of a Student Trustee in CUSU?*** |
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| ***Please outline any qualifications, awards or experiences that are relevant to this position:*** |
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| ***Why do you want to be a Student Trustee?*** |
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| ***Anything else to add?*** |
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