

APPLICATION FORM

EXTERNAL MEMBER OF THE CITY OF LONDON POLICE COMMITTEE



1. PERSONAL DETAILS

Title (Mr/Mrs/Ms/Dr, etc)

Name in full (please also give any other names by which you have been known)

Permanent home address

How long have you lived at this address?

If less than five years at this address, please give details of your previous address(es)

Daytime telephone no

Evening telephone no

Mobile telephone no

Email address

Are you aged 18 or over? (please tick as appropriate)

Yes

☐

no

☐

2. PERSONAL HISTORY

What is your current occupation, if any?

Name & address of employer / appointing body *	Dates	Position held and nature of responsibility

Please give details any voluntary work, or any work you do or have done in the local community

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* NB: if you do not live in the City of London and/or have not done so during the past 12 months please include the main location of your work if this is different from your employer/appointing body's address

Please list any academic, professional and/ or vocational qualifications	Date obtained

Please give details of any other role or activity that you think is relevant to this application, not already mentioned above	

3. RELEVANT SKILLS AND EXPERIENCE

Please give examples to demonstrate how you meet the following competencies:
(You can use additional pages if needed)

1. Strategic thinking

2. Good judgement

3. Openness to change

4. The ability to scrutinise and challenge

5. Analytical ability

6. Ability to communicate effectively

7. Community engagement

8. Effective time management

Please give examples to demonstrate the extent to which you possess the following personal skills and qualities (You can use additional pages if needed):

1. Team working

2. Self-confidence

3. Enthusiasm and Drive

4. Respect for others

5. Integrity

6. Leadership

7. Decisiveness

4. WHY DO YOU WANT TO BE AN EXTERNAL MEMBER OF THE CITY OF LONDON POLICE COMMITTEE?

Please say why you are interested in becoming an external member of the City of London Police Committee (You can use additional pages if needed):

5. REFERENCES

Please give details of two people, not related to you, who have agreed to be contacted by us about your application. It would be helpful if one referee was familiar with your community activities.

Name		Name	
Address		Address	
Tel no:		Tel no:	
Position:		Position:	

Please note that references will be requested before interviews take place.

6. OTHER INFORMATION

Are you disabled ¹ ? (please tick as appropriate)	
Yes	<input type="checkbox"/> no <input type="checkbox"/>
If yes, please say whether there is any special provision, equipment, or other assistance we can provide to help you attend an interview:	
Is there any other relevant information about yourself you would like the selection panel to know in considering your application?	
If so, please give details:	

7. PLEASE SIGN AND DATE THIS FORM

I declare that the information I have given is true and complete.	
Signed Date	

8. WHAT TO DO NOW?

<p>Please return this completed application form and monitoring questionnaire by Friday 2 April 2015 via post or email to:</p> <p>Town Clerk's Office City of London Corporation PO Box 207 Guildhall, London EC2P 2EJ</p> <p>Katie.odling@cityoflondon.gov.uk</p> <p>T: 020 7332 3414</p> <p>If you have any questions or queries, please contact us for further information.</p>

¹ You are disabled under the Equality Act 2010 if you have a physical or mental impairment that has a 'substantial' and 'long-term' negative effect on your ability to do normal daily activities.