



## Social Workers' Benevolent Trust

# APPLICATION TO BECOME A TRUSTEE

Surname:

First name(s):

Title:

Date of birth:

Address for correspondence

Telephone:

Mobile:

E-mail address:

Relevant Employment / Work (with dates).

Willingness to be included on a WhatsApp Group. Yes/No?

Relevant Skills / Interests (please also complete attached 'Trustee Skills Audit').

Please Give Your Reasons for Applying to become a Trustee of SWBT.

Do You Have a Current DBS Certificate? Is it one that has been registered for Update?

Please Supply: Referee (Names and addresses of two people who have known you for the last 5 years and who can comment on your suitability to be a Trustee).

Signed:

Date: