

# West Mercia Police and Crime Panel

## Application Form for Independent Lay Co-opted Member

### 1. PERSONAL DETAILS

Title (Mr/Mrs/Ms etc)

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

Permanent home address

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

Contact details	
Daytime phone number:	
Evening phone number:	
Mobile phone number:	
Email address:	

Please say whether there is any special provision, equipment of assistance we can provide to help you attend an interview

### 2. PERSONAL HISTORY

What is your current employment status and occupation, if any?

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Please give details of part-time and full-time employment, voluntary work, career breaks and other work you do or have done in the local community. If you do not live in the West Mercia area 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's address.

Name and address of employer / organisation	Dates position held (from/to)	Positions held and nature of responsibility

Please give details of any involvement in local community activities not already mentioned above.

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

**3. REQUIRED COMPETENCIES, PERSONAL SKILLS AND QUALITIES**

Please give examples to demonstrate how you meet the following competencies, personal skills and qualities (these are discussed in greater depth in the accompanying information)
<b>1. The ability to think strategically</b>

<b>2. The ability to scrutinise and challenge</b>
<b>3. The ability to be analytical</b>
<b>4. The ability to communicate effectively</b>
<b>5. Enthusiasm and Drive</b>
<b>6. Respect for others</b>
<b>7. Decisiveness</b>

**4. WHY DO YOU WANT TO BE A CO-OPTED INDEPENDENT MEMBER?**

Please say why you are interested in becoming a co-opted independent member of the West Mercia Police and Crime Panel (please continue on a separate page if needed).

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**5. OTHER INFORMATION**

If you are employed, is your employer willing to release you to carry out the duties of a co-opted independent member of the west Mercia Police and Crime Panel?

<p>Do you hold, or have recently held, any of the following positions?</p> <ul style="list-style-type: none"><li>• The Police and Crime Commissioner (PCC) for West Mercia</li><li>• A member of staff of the PCC for the West Mercia</li><li>• A member of the civilian staff of the West Mercia police force</li><li>• A Member of Parliament, National Assembly for Wales, Scottish Parliament or the European Parliament</li><li>• An elected member of Herefordshire Council, Shropshire Council, Telford and Wrekin Council, Worcestershire County Council, Bromsgrove District Council, Malvern Hills District Council, Redditch Borough Council, Worcester City Council, Wychavon District Council and Wyre Forest District Council.</li><li>• A police officer</li></ul> <p>If yes, please give details.</p>

<p>Is there anything in your private life or working life, or in your past, or to your knowledge in that of any member of your family or close friends, which, if it became generally known, might bring you, or the West Mercia Police and Crime Panel into disrepute, or call into question your integrity, authority or standing as a member of the Panel? If yes, please give details <i>(The successful candidates will be subject to a Disclosure and Barring Service check).</i></p>

## 6. REFERENCES

Please give details of two people, not related to you, who are able and willing to comment on your suitability for this position. It would be helpful if at least one of the referees was familiar with your community activities

Name : _____	Name : _____
Address: _____ _____	Address: _____ _____
Email: _____	Email: _____
Tel No: _____	Tel No: _____

## 7. DECLARATION

### I confirm that:

- I have read the background information and understand and accept the commitment needed to be an active member of the West Mercia Police and Crime Panel.
- The information that I have provided is correct and complete.
- I would observe any rules set by the Panel, respect confidentiality and act in good faith in the interests of the Panel.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

Please return this completed application form and monitoring questionnaire by

**5.00p.m**, Thursday 18th August 2016 to:

Simon Mallinson, Head of Legal and Democratic Services, Worcestershire County Council, County Hall, Spetchley Road, Worcester, WR5 2NP or by e.mail to [smallinson@worcestershire.gov.uk](mailto:smallinson@worcestershire.gov.uk)



## Equal Opportunities Monitoring Form

Worcestershire County Council is committed to the elimination of all forms of unjustifiable discrimination. The County Council will actively pursue equality of opportunity for all by seeking to ensure that all prospective and existing employees are treated fairly. Personal circumstances and characteristics will only be taken into account when they can be justified as being relevant to employment. To enable the County Council to constantly monitor itself to ensure this commitment is fulfilled, we would ask **all applicants** to complete the questions detailed below

**This information will be treated as completely confidential and will be used for monitoring purposes only. This information will be detached from the application form on receipt and will not be considered during the selection process.**

### Please tick as appropriate:

#### 1. Which of the following do you consider to be your ethnic origin?

(tick only one box), see below for explanatory notes.

- |   |   |  |
|---|---|--|
| <input checked="" type="checkbox"/> White British (AWB)                   | <input type="checkbox"/> White and Black Caribbean (BWBC) | <input type="checkbox"/> Indian (CIN)      |
| <input type="checkbox"/> White Irish (AWI)                                | <input type="checkbox"/> White and Black African (BWBA)   | <input type="checkbox"/> Pakistani (CP)    |
| <input type="checkbox"/> White Other (AWO)                                | <input type="checkbox"/> White and Asian (BWA)            | <input type="checkbox"/> Bangladeshi (CB)  |
| <input type="checkbox"/> Chinese (ECH)                                    | <input type="checkbox"/> Mixed Other (BMO)                | <input type="checkbox"/> Asian Other (CAO) |
| <input type="checkbox"/> Caribbean (DBC)                                  | <input type="checkbox"/> African (DBA)                    | <input type="checkbox"/> Black Other (DBO) |
| <input type="checkbox"/> Other Ethnic Group (EOE) (Please describe) ..... |   |  |

2. Are you  Male  Female

3. Do you have a disability?  Yes  No

#### 4. Please tick the age band currently applicable to you

- i. up to 19     ii. 20-29     iii. 30-39     iv. 40-49     v. 50-65     vi. Over 65

### Where did you see this post advertised?

## Monitoring Form Explanatory Notes

The ethnic groups set out above are those recommended by the Commission for Racial Equality and used in the 2001 Census.

Ethnic origin questions are not about nationality, place of birth or citizenship, they are about colour and broad ethnic group.

UK citizens can belong to any of the groups indicated. If you are descended from more than one ethnic group, please tick the group to which you consider you belong or tick the 'other ethnic group' box and give details in the space provided above.

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