**Application for TVNP Grants Scheme Community Representative**

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| Forenames: |  |
| Surname: |  |
| Email address |  |
| Present Address: |  |
| Telephone No. |  |
| Where did you see the post advertised? |  |

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| Previous relevant employment and/or voluntary experience (in date order, starting with the most recent.) |
| Dates | Employer, including address | Job Title |
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| Skills and experience |
| Please describe how your past experience makes you suitable for the role. |
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| OTHER INTERESTS |
| Please describe any interests or hobbies that may be relevant to your application. |
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| REFERENCES  |
| We require details of two referees |
| Name: |  |
| Address: |  |
| Daytime telephone no.: |  |
| Relation to you: |  |
| Can we contact this referee without contacting you first?  |  |
|  |
| Name: |  |
| Address: |  |
| Daytime telephone no: |  |
| Relation to you: |  |
| Can we contact this referee without contacting you first?  |  |

Please return your completed application form by email to: TVNP@teeswildlfie.org