



## BURTON SOUNDING BOARD Application Form

Thank you for your interest in joining the **Burton Sounding board**. Please refer to the attached flyer about the panel, and who we are looking for, before completing this application form.

The completed form should be returned by email to: [enterprise.team@eaststaffsbc.gov.uk](mailto:enterprise.team@eaststaffsbc.gov.uk) by **17.30 on Monday 12 July 2021**.

Shortlisted applicants must be available to attend an online workshop session, on either Wednesday 14th or Thursday 15th July 2021, 6.30pm-8.30pm.

Burton Councillors and Council employees are not eligible to be panel members.

### Personal details

Surname:		First name(s):	
Address:		Postcode:	
Email:		Telephone:	
Preferred method of contact (Please x)	Email		Telephone
How did you hear about this opportunity?			
What is your connection to the Burton area?-tick all that apply			
Live in the area		Work in the area	
Regular visitor		Study in the area	
Other (please specify)			

**Your interest in the Burton sounding board**

Please provide a personal statement of **no more than 200 words** explaining why you would like to volunteer to take part in the **Burton sounding board**

What do you think are the main challenges and opportunities for the future of Burton upon Trent

What would you be looking for in a possible future development of the High Street and riverside area of Burton upon Trent?"

**Local knowledge, skills and experience**

What relevant skills and experience would you bring to the role?

Are there any aspects or areas of Burton upon Trent which you know particularly well?

*Please provide information on relevant employment or voluntary experience, including involvement in local groups or events. Remember we're looking for people who are passionate about the area and who can articulate a local perspective*

I confirm that all the information given in this application form is to my knowledge true and accurate.

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

Date: \_\_\_\_/\_\_\_\_/2021

*A typed or scanned signature is acceptable.*

## Diversity monitoring

We ask applicants to complete the following questions to help us monitor the effectiveness of our approach to equality and diversity on the Burton Sounding Board. The information you provide will only be used to help monitor our performance. All information will be treated in the strictest confidence.

What is your age?

18 – 24 years

25 – 34 years

35 – 44 years

45 – 54 years

55 – 64 years

65 – 74 years

75 – 84 years

84 – 94 years

95+

What is your sex?

Female

Male

Non-binary

Prefer not to say

Is your gender identity the same as you were assigned at birth?

Yes

No

Prefer not to say

What is your nationality?

What is your ethnic origin?

What is your preferred language?

English

Other\*

\*If other, please specify

What is your religion or belief?

Buddhist		Sikh	
Christian (all denominations)		Hindu	
Jewish		Other*	
Muslim		No religion	
Prefer not to say			

\*If other, please write below

Are you married or in a civil partnership?

Married		Divorced	
Separated		Widowed	
Registered in a civil partnership		Formerly in a civil partnership that is now legally dissolved	
Surviving member of a civil partnership		Never married or in a civil partnership	

What is your sexual orientation?

Heterosexual / straight		Lesbian / gay woman	
Gay man		Bi-sexual	
Prefer not to say			

Are you currently pregnant and/or on maternity leave?

Yes		No	
-----	--	----	--

Are your day-to-day activities limited because of a health problem or disability which has lasted, or is expected to last, more than 12 months?

Yes, limited a lot*		Yes, limited a little*		No	
---------------------	--	------------------------	--	----	--

\*If yes, please tick the box or boxes that best describe the nature of your impairment.

Hearing/vision		Physical/mobility		Mental health	
Learning difficulties		Memory problems			

