

**Town Councillor Co-option Application Form**

**Name**

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**Address**

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**Tel (home and/or mobile)**

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| Click or tap here to enter text. |

**Email**

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| Click or tap here to enter text. |

**I confirm that I am over 18 years old**

**Please indicate that you are willing to stand for Corsham Pickwick Ward**

**Proposer** **(must be a serving Corsham Town Councillor)**

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| Click or tap here to enter text. |

**Seconder (must be a serving Corsham Town Councillor)**

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| Click or tap here to enter text. |

**What interests you about the work of Corsham Town Council and how do you feel you could contribute?**

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| Click or tap here to enter text. |

**What relevant knowledge, skills and experience could you bring to the town councillor role?**

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| Click or tap here to enter text. |

**Please detail anything else you would like to tell us in support of your application**

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| Click or tap here to enter text. |

**Declaration**

I confirm I am eligible for the vacancy of Corsham Town Councillor and not disqualified under Section 80 of the Local Government Act 1972.

I confirm I have read the document, ‘Co-Option Guidance for Applicants’.

I declare the information given in this form is true and correct.

**Signed**

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| Click or tap here to enter text. |

**Name**

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| --- |
| Click or tap here to enter text. |

**Date**

|  |
| --- |
| Click or tap to enter a date. |

Please email this completed form to David Martin, Chief Executive: [dmartin@corsham.gov.uk](mailto:dmartin@corsham.gov.uk)

Telephone 01249 702130

For further information about how Corsham Town Council uses your personal data, including your rights as a data subject, please see our privacy policy: <https://www.corsham.gov.uk/information/policies.php>