**BUCS HOCKEY NATIONAL LEAGUE – LMC CHAIR**

EXPRESSION OF INTEREST FORM

**STRICTLY CONFIDENTIAL**

# Please complete this form clearly and in BLACK INK or electronically.

**PERSONAL DETAILS**

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| **Surname: Title:** **First name: Date of birth:** **Home address:****Home telephone number: Work telephone number:****Mobile: E-mail:** |

**GENERAL**

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| **Have you been convicted of any criminal offences? YES/NO****If yes, please supply details of any criminal convictions:****Is a criminal prosecution pending? YES/NO** |

**INFORMATION IN SUPPORT OF YOUR EXPRESSION OF INTEREST**

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| **Please give details of any information in support of your expression of interest; including any qualifications, volunteering and previously held roles, etc. (continue on separate sheet if necessary).**  |

**DATA PROTECTION STATEMENT**

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| The information you provide on this form and that obtained from the other relevant sources will be used to process your application for involvement on this group. The personal information you give us will also be used in a confidential manner to help us monitor our recruitment process. We may check the information collected with third parties or with other information held by us. We may also use or pass on to certain third parties information as permitted by law.By signing the expression of interest form we will be assuming you agree to the processing of personal data (as described above) in accordance with our registration with the Data Protection Commissioner.Please check this box [ ]  to confirm you give your consent to the information in this application form being processed and stored (by means of a computer database or otherwise), for the duration of the recruitment process, and if recruited by BUCS, for the duration of your appointment and to fulfil the statutory, or recommended, retention periods when you are no longer a volunteer of BUCS. |

**VOLUNTEER CODE OF CONDUCT**

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| By signing the expression of interest form you acknowledge you have read and agree to the terms of our [Volunteer Code of Conduct](https://www.bucs.org.uk/page.asp?section=19215&sectionTitle=Volunteer+Code+of+Conduct) and [Privacy Policy](https://www.bucs.org.uk/page.asp?section=16206&sectionTitle=Privacy+Policy), and agree to adhere to data protection laws if handling any data as required by your role if recruited by BUCS. |

**DECLARATION**

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| I confirm all information given in this form is correct to the best of my knowledge, all the questions related to me have been accurately and fully answered and I am in possession of the qualifications I claim to hold. I understand any omission or misrepresentation may render me liable to dismissal should I be selected.I give my consent to BUCS to record, process and validate my personal information and sensitive personal data in line with the General Data Protection Regulation and any subsequent data protection laws.**SIGNED**……………………………………………………………**DATE**………………………………………… |

**PLEASE RETURN THIS FORM TO:**

Alicia Lauckner, Hockey Development Manager – alicia.lauckner@bucs.org.uk

**OFFICE USE ONLY**

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| **Date Received: Date Acknowledged: Application Number:** |