

DECLARATION OF INTERESTS

Are you a member of a political party?

YES NO

If you have answered yes, please let us know which one

Do you have any financial or other interest in the Trust?

YES NO

If you have answered yes, please let us know what your interest is

Please note: This information will be published. Where you have answered no, the word 'none' will be published as your answer.

DECLARATION

I, the above named candidate, consent to my nomination and agree to stand for election to the Council of Governors in the constituency indicated on page 2 of this form. I also declare that I belong to that constituency.

I, the above named candidate, hereby declare that I am not:

- a person who has been adjudged bankrupt or whose estate has been sequestrated and (in either case) has not been discharged
- a person who has made a composition or arrangement with, or granted a trust deed for, their creditors and has not been discharged in respect of it
- a person who within the preceding five years has been convicted in the British Islands of any offence if a sentence of imprisonment (whether suspended or not) for a period of not less than three months (without the option of a fine) was imposed on them
- excluded by any other provision detailed within the Trust's constitution.

I confirm that, to the best of my knowledge, the information provided on (or in connection with) this form is accurate.

Please note that if you are successfully elected you will be required to undertake a Disclosure and Barring Service (DBS) check. By submitting this nomination form, you are agreeing to undertake a DBS check if elected.

Signature:

Date:

- Remember to sign the declaration before returning your nomination form.
- Your nomination form won't be valid without your signature.

CHECKLIST

Before returning your nomination form, please ensure you have:

Please tick

- Completed all sections
- Signed the declaration above
- Checked your statement for accuracy and the maximum number of words
- Provided a photograph if you would like one published in the election statements booklet

You can complete this form online at
www.cesvotes.com/royalberkshire2024

nomination form

Election to the Council of Governors

WELCOME

The Trust welcomes nominations from persons of any age (16 or over), race, colour, religious belief, ethnic or national origin, sexual orientation, gender, disability or marital status.

CRITERIA: TO BE ELIGIBLE TO STAND FOR ELECTION

Before you proceed, you must first of all check that you meet the following criteria:

1. Be a member of the Royal Berkshire NHS Foundation Trust
2. Belong to the constituency you wish to represent
3. Be willing to declare your political and financial interests on page 4 of this form

HELP COMPLETING THIS FORM

If you require any further information or assistance to complete this form, or if you require the nomination form in large print, Braille, audio or another language, please contact Ciara Hutchinson at Civica Election Services (CES) on 020 8889 9203 or email ciara.hutchinson@cesvotes.com

HOW TO RETURN THIS FORM

THIS FORM MUST BE RECEIVED BY 5PM on MONDAY 15 JULY 2024

Once you have completed all sections of your nomination form you may return it in the special reply envelope provided or email it to ftnominations@cesvotes.com

Please ensure it is **received** by the Returning Officer, Civica Election Services, no later than **5PM on MONDAY 15 JULY 2024**. It won't be possible for you to stand in this election if your nomination form is received after this time.

All nomination forms received will be acknowledged in writing to the contact address you have provided. We strongly **recommend** that you contact Ciara Hutchinson on 020 8889 9203 to check that we have received your form. This is very important if you have sent it close to the deadline or if you have not received an acknowledgement.

If you have mislaid your reply envelope, please return your nomination form to the Returning Officer, Civica Election Services, The Election Centre, 33 Clarendon Road, London N8 0NW.

Thank you for taking the time to complete this nomination form.

