Declaration o	f interests						
Ť	er of a political party? vered yes, please let us know which one:	YE	S		NC)	
	v financial or other interest in the Trust? vered yes, please let us know what your interest is:	YE	ES		NO	0	
Please note: This i	nformation will be published. Where you have answered	no,	the word	d 'none'	will be	publi	ished as your answer.
Declaration*							
	ned candidate, consent to my nomination and agree e constituency indicated on page 2 of this form. I als						
I, the above nam	ned candidate, hereby declare that I am not:						
 a) a person who has been adjudged bankrupt or whose estate has been sequestrated and (in either case) has not been discharged b) 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 c) 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 d) excluded by any other provision detailed within the Trust's constitution. 							
_	the best of my knowledge, the information provid			conne	ction	with)	this form is
	if you are successfully elected you will be required submitting this nomination form, you are agreeing						
Signature:			Date:				
Remember to sign the declaration before returning your nomination form. Your nomination form won't be valid without your signature.							
					* Tł	nis is	a legal requirement
Checklist							
Before returning	your nomination form, please ensure you have (please e	ease	tick):				
Comple	eted all sections						
Signed	the declaration above						
Checke	d your statement for accuracy and the maximu	um	numbe	r of w	ords a	allow	red
Provide	d a photograph if you would like one published	d in	the ele	ection	stater	nent	s booklet



You can complete this form online at www.cesvotes.com/RBFT2025

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 WEDNESDAY 6 AUGUST 2025

Once you have completed all sections of your nomination form, return it in the special reply-paid envelope provided or scan and email it to ftnominations@cesvotes.com. Alternatively, you can complete it online at www.cesvotes.com/RBFT2025



Please ensure it is **received** by the Returning Officer, Civica Election Services, no later than the date shown above. 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/email 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 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.



V1694_1_P1 4 V1694_1_P1 1

Your details		please use BLOCK CAPITALS				
Full Name:						
	Name as you wish it to appear on the election material: (if different to Full Name):					
Title (e.g. Mr, Ms, Dr. Only professional titles will be shown):						
Home Address:	Home Address:					
Post Code:	ode: Date of Birth:					
Contact Telephone	Number:					
Contact Email Addr	'ess:					
PLEASE NOTE Use of the personal information (data) you have provided: - your personal information will be used for the purpose of this nomination and for any ballot or appointment that may be required and for no other purpose. - your personal information will remain confidential unless the Trust is required to release it by law.						
Your constituend						
	h constituency you belong to. Please	tick one box only.				
Public		Staff				
East Berkshi	ire & Borders	Volunteers				
vvest berksr	nire & Borders					

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Please print your name clearly on the reverse side of your photograph and glue it here (do not staple) You are invited to submit a photograph of yourself, to be published alongside your statement in the election statement booklet. While there's no requirement to submit one, providing a photograph can help voters to identify you. A head and shoulders, passportstyle photo is ideal.

You can affix your photograph to this form or by email it to **ftnominations@cesvotes.com**

Please tick here if you have emailed your photograph

Your election statement: why you would like to be a governor

Your election statement, describing why you think you should be elected, will be circulated to voters in the election statements booklet accompanying the ballot paper.

Before you start writing your statement, we recommend that you read the enclosed 'preparing your election statement' document.

You can handwrite your statement in the space below, attach a copy to this form or email it to **ftnominations@cesvotes.com**

Please tick here if you have emailed your statement

Your statement will be reproduced word for word as supplied (in upper and lower case) so remember to read it through carefully and check for any mistakes before you submit it. Please keep to the word limit shown below as we will cut any words that exceed that limit.

Please note that voters won't get to read any words that exceed the word limit so please ensure your statement is no longer than it should be.

3

Total number of words:

Word limit: 250

2