

## **APPLICATION FORM FOR PARISH COUNCILLOR**

NAME			
ADDRESS			
POST CODE			
TELEPHONE			
EMAIL			
DATE OF BIRTH			
I hereby confirm that:			
I meet the criteria for eligibility to be a member of the council (criteria is set out in s.79 of the 1972 Act). and I am not disqualified to be a member of the council (criteria is set out in s.80 of the 1972 Act).			
Signed		Date	
You application needs to be supported by two (over 18) residents of the parish, preferably from separate households.			
Name & address of proposer.		Signature	
Name and address of seconder.		Signature	

Please outline below why you would like to become a Parish Councillor and include 3 qualities or talents that you could bring to the organisation.		
A copy of this page will be circulated with the Council agenda to all Councillors.		