

## APPENDIX A

### STANTON PARISH COUNCIL CO-OPTION APPLICATION FORM

<b>Name:</b>	
<b>Address:</b>	
<b>Telephone Number:</b>	
<b>Email Address:</b>	
<b>Are you 18 or over? Yes / No</b>	

Please detail any experience you may have that is relevant to Stanton Parish Council (if necessary continue onto a separate sheet)

Is there any other information you would like to disclose regarding your application? (If necessary, please continue on a separate sheet).

**Use of Personal Information**

The Parish Council will use your information, including that which you provide on this application form, to assess your suitability to be a parish councillor.

**Declaration & Consent**

I have read the section entitled "Use of Personal Information" and by signing this form I consent to the use and disclosure of my information included in this application form.

I declare the information given on this form to be true and correct.

SIGNED..... NAME.....

DATE.....

**Please complete and return this form, together with Appendix B - Co-option Eligibility Form to:**

The Clerk, Stanton Parish Council, 20 Micklesmere Drive, Ixworth, Bury St Edmunds, Suffolk, IP31 2UJ  
Tel: 07729 731128  
Email: stantonparishcouncil@gmail.com