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| **Company Law requires that certain conditions must be met for a person to be eligible to be a member of a Board. Please complete each declaration below.** | |
| I am not disqualified from acting as a director of a company for any reason, and I am not aware of any pending action which may result in such disqualification. | **Agree/Disagree** |
| I have not been convicted of a criminal offence. | **Agree/Disagree** |
| I am not an undischarged bankrupt and have not made any arrangement or composition with creditors. | **Agree/Disagree** |
| I am not disqualified under Section 72 of the Charities Act 1993 from being a charity trustee. | **Agree/Disagree** |
| I am not being treated by a Medical Practitioner to the extent a written opinion could be given to Two Rivers Housing stating that I have become mentally or physically incapable of acting as a Board member, and a court has not made any order which wholly or partly prevents me from personally exercising any rights or powers which I would otherwise have related to my mental health. | **Agree/Disagree** |
| I am not employed by Two Rivers Housing. If you have been and have had your employment terminated for any reason, please confirm why. | **Agree/Disagree** |
| I am not a Board member / shareholder / director / manager / employee of another registered social landlord (to enable the Board to determine the balance of such members under conduct and governance codes). | **Agree/Disagree** |
| I am not subject to legal action for anti-social behavior against me or someone living with me. | **Agree/Disagree** |
| **If you have disagreed with any of the above statements, please provide details.** | |
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| **If you are a Board member / shareholder / director / manager / employee of another registered provider, please provide details.** | |
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| **AVAILABILITY FOR INTERVIEWS: Please provide details of any dates you are not available for interview for the weeks commencing 12 or 19 December 2022 and between 2 and 13 January 2023.** | |
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| **Declaration** | | | | |
| Are you related to any Board member, manager, or employee of Two Rivers Housing group, or are you a Two Rivers Housing tenant? | | | | **Yes / No** |
| I certify that, to the best of my knowledge, the information I have supplied is correct. I understand that deliberately giving false or incomplete information would disqualify me from appointment or in the event of discovery after appointment, would lead to my appointment being terminated without notice. | | | | **I agree** |
| **Name** |  | **Signature** |  | |