



DODINGTON PARISH COUNCIL

APPLICATION TO FILL A CASUAL VACANCY BY CO-OPTION

| | |
|-------------------------|--|
| FULL NAME | |
| HOME ADDRESS | |
| TELEPHONE NUMBER | |
| EMAIL ADDRESS | |

STATEMENT IN SUPPORT OF APPLICATION

Please explain why you would like to join the Council and include details of current or previous employment, personal interests, membership of local bodies/clubs, etc, that you feel will be relevant to your application.

Continue overleaf

Please confirm that you are eligible to become a Parish Councillor:

Are you over 18 years of age?

You are a British Citizen, a citizen of another Commonwealth country, a citizen of another member state of the European Union:

Do you have a criminal record?

Have you been declared bankrupt within the last 5 years?

Are you an Elector of the Parish? Electoral letter and Number, if known:

Do you reside in the Parish or within 3 miles of the Parish boundary?

Signed:

Dated: