Section three: declaration

DECLARATION OF INTERESTS

DCHST.communications@nhs.net

	You MUST declare your interests to be eligible to stand for election (see criteria on page 2)	
	Are you a member of a political party? Yes No	
	If you have answered yes, please indicate:	
	Do you have any financial or other interest in the Trust? Yes No	
	If you have answered yes, please indicate:	
	PLEASE NOTE: If you have answered no to both questions, the word 'none' will be published as your answer.	
	DECLARATION I, the above named candidate, consent to my nomination and agree to stand for election to the Council of Governors in the constituency indicated in Section One of this form. I also declare that I am a member in that constituency. I, the above named 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 5 years has been convicted in the British Isles of any offence if a sentence of imprisonment (whether suspended or not) for a period of not less than 3 months (without the option of a fine) was imposed on them d. excluded by any other provision detailed within the Trust's Constitution e. a member of DCHS NHS Foundation Trust staff I understand that if appointed I am not able to be a Governor or non-executive director of another NHS organisation. I confirm that, to the best of my knowledge, the information provided on (or in connection with) this form is accurate.	
	Signature: Date:	
	Returning your nomination form	
	CLOSE OF NOMINATIONS	
	The nomination form must be received by the Returning Officer, UK Engage, Image House, 10 Acorn Business Park, Heaton Lane, Stockport SK4 1AS no later than 5pm on 19 August 2022 . Any nomination form received after this time and date will be ruled invalid. Please return your nomination form in the special reply envelope provided or email your form to dchs@uk-engage.org	
	The safe return of this form is the responsibility of the candidate (you are encouraged to return it by first class post). All nomination forms received will be acknowledged within 24 hours by first class post or email to the address provided. If you have not received your acknowledgement after this time, please contact UK Engage on 0345 209 3770.	
CHECKLIST (please ensure you have ticked each box)		
	Signed the Declaration above Completed each section of this form	
	Submitted your photograph if you have chosen to provide one	

Public nomination form

To stand for the 2022 election to the Council of Governors





Could you be one of our Governors?

You are being invited to stand for the 2022 election to the Council of Governors.

The Trust welcomes nominations from public members of any age (16* or over), race, colour, religious belief, ethnic or national origin, sexual orientation, gender, disability or marital status.

Please read the 'Notes for guidance' on page 2 and the enclosed document before completing this form.

ALL sections must be completed. *Must be 16 at nomination close date

An electronic version of this form is available at:

https://hub.ukevote.uk/dchs

Notes for guidance

In order to stand for election a candidate must fulfil the following criteria:

- 1. Be a public member of the Derbyshire Community Health Services NHS Foundation Trust
- 2. Be a public member of the constituency they wish to stand for
- 3. Be willing to declare their political and financial interests on this form.

ALL SECTIONS MUST BE COMPLETED

Section one: your details

CANDIDATE'S DETAILS: (PLEASE USE BLOCK CAPITALS)

(
Full name:	Title (e.g. Mr, Ms, Dr):		
Name as you wish it to appear on the election material (if different to full name):			
PLEASE NOTE: Your title including any honours etc will not be published on the ballot paper.			
Home address:			
Post code:			
Date of birth: Contact	telephone number:		
Contact email address (if applicable):			
PLEASE NOTE: Address and telephone information is for the sole use of UK Engage and the Trust so they can contact you about your nomination form and hold your details. This information will remain confidential unless the Trust is required to release it by law.			
CONSTITUENCY DETAILS: (PLEASE TICK ONE BOX ONLY)			
I wish to stand as a Governor in the following pul	olic constituency:		
Amber Valley, Erewash & South Derbyshire	Derby City		
Bolsover, Chesterfield & North East Derbys	hire Derbyshire Dales & High Peak		

Section two: your election statement

UK Engage encourages you to email your statement to dchs@uk-engage.org . If you do not hat access to email, please handwrite your statement neatly in the space below. Remember to reathrough your statement carefully before returning your completed form.		
	Number of words (max 250)	
Please tick here	if you have emailed your statement to dchs@uk-engage.org	
UK ENGAGE RECOM	MENDS THAT YOU ATTACH A COPY OF YOUR EMAILED STATEMENT TO THIS FORI	
	CANDIDATE'S PHOTOGRAPH:	
Please print your name	Please read the enclosed 'preparing your election statement' document before	
clearly on the	submitting your photograph.	
reverse of your photograph	Your name:	
and glue it here (do not staple)	Your name:	
(do not staple)	Your constituency:	
The attached photog	graph has been emailed to UK Engage at dchs@uk-engage.org	

Do not embed the photo into the nomination form.

If returning your form by email, please attach your photo as a separate file to the email.