Appendix A

Expression of Interest for Co-Option



Thank you for your interest in becoming a Parish Councillor. Please provide the information below to tell us a little about you.

Full Name & Title	
Home Address	
Home Telephone	
Mobile Telephone	
Email Address	
About you: Please pro	ovide Billinghay Parish Council with some background information about yourself.

Reasons for applying Please provide Billinghay Parish Council with your reasons for wanting to become a Parish Councillor.			
Please explain the experience and skills that you can bring to Billinghay Parish Council:			

By signing this form you hereby confirm that you are eligible for the vacancy of Billinghay Parish Councillor, and the information given on this form is a true and accurate record.

Signature & Date		
	Proposer	Seconder
Name		
Address		
Signature & Date		

Please return your completed application to the Clerk to Billinghay Parish Council. All applicants will be invited to interview and recommendations will be made at the next available Parish Council meeting, where a vote will be held to decide whether Billinghay Parish Council agrees to co-opt you as a Parish Councillor. Data Protection Act 2018: The information provided on this application will remain private and confidential.