



Election to the Council of Governors 2015 Nomination Form

You are being invited to stand for election to the Council of Governors 2015. To be considered for Governorship, you must be a member of the Constituency in which you are seeking election.

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

Nominations Close at 12 noon on Friday 5th June

Completed forms must be sent to: The Electoral Registration Officer, **Idox Elections**, 25D Bishop Street, Londonderry, BT48 6PR. Nominations **MUST** be received by **5pm on Friday 24th April 2015**. Any forms received after this date and time will be declared invalid.

- All sections of this form **MUST** be completed or your nomination will be invalid.
- Please read the guidance notes at the end of each section to help you complete the form correctly.

Section One – Candidate’s Details (PLEASE USE BLOCK CAPITALS)

Title (Mr/Mrs/Ms/Miss/Dr/etc):

Full Name

Name exactly as you wish it to appear on election material, if different to above:

Contact Address:

Post Code:

Contact Phone Number:

Email:

I wish to stand as a Governor in the following constituency of which I am a member. PLEASE TICK ONE BOX ONLY *Please Note : An individual wishing to be elected as a Governor must have been a Member of Cheshire and Wirral Partnership NHS Foundation Trust for a period of at least 12 months on the last day of the nomination process.

Service User & Carer	Public	Staff Constituency
Service User & Carer (1 seats) <input type="checkbox"/> (term of office - 2015)	Out of Area (1 seat) <input type="checkbox"/> (term of office - 2017)	Medical (1 seat) <input type="checkbox"/> (term of office – 2017)
Service User & Carer (1 seat) <input type="checkbox"/> (term of office – until 2016)	Public – Cheshire East <input type="checkbox"/> (term of office - 2017)	

Declaration of Interests:

Such interests do not prevent you from standing, but these details will be distributed to voters as part of your election statement.

Are you a member of a political party? **Yes / No** (delete as applicable)

If Yes, please specify which one:

Do you have any financial or other interests in Cheshire and Wirral Partnership NHS Foundation Trust?
Yes / No (delete as applicable)

If Yes, please give brief details:

PLEASE NOTE: If you have answered no to both questions the word 'none' will be published as your answer.

Section Two - Candidate Election Statement

Please see important notes overleaf before completing this section (maximum 250 words)

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Total no. of words: (maximum is 250)

Candidates will be listed in alphabetical order in the Statement of Candidates and on the ballot paper. The following details will be published in the Statement of Candidates (to be circulated with the ballot paper):

- Candidate's name and address
- A statement from the candidate and photograph (see important notes below) – 250 words
- Declaration of interests
- Candidate Statements will be reproduced in black and white.

- I am providing an election statement to support my nomination. **Yes / No** (delete as applicable)
- I am emailing a copy of my election statement to nhsft@idoxgroup.com **Yes / No** (delete as applicable)
- I am emailing a photograph to nhsft@idoxgroup.com **Yes / No** (delete as applicable)

Passport-sized
Photograph
(please write
your name on
the back of the
photograph also)

Your Name _____

Your Constituency (e.g. Public Cheshire East)

Important notes for prospective candidates on completing Section Two

Content of Statement

- Your Election Statement should describe why you think you should be elected. You may wish to consider your reason for standing, the skills you could bring to this role and your relationship/contact with the Trust.
- Your Statement will be reproduced to be circulated to all eligible voters along with the ballot paper.
- Your statement must not exceed 250 words. Any statement received that exceeds 250 words will be edited at the cut-off point of 250 words.
- In the interests of fairness Idox Elections makes every effort to ensure candidates' election statements are reproduced exactly as they have been submitted. Therefore, please check your election statement carefully for any grammatical or spelling errors before submitting it.
- Cheshire and Wirral Partnership NHS Foundation Trust and Idox Elections reserve the right to edit or not publish any statement that exceeds the word limit or, to their reasonable belief, contains material that is factually inaccurate or libelous or is intended to deceive or is defamatory or offensive in nature.
- Failure to provide a statement will invalidate a candidate.
- Failure to provide a photograph invalidates a candidate and their nomination will be invalid.
- If you are standing in the Public or Service User & Carer constituency and would like support in completing your form, please contact MIND to arrange this on 01244 343489 (Chester), 0151 512 2200 (Wirral), 01606 863305 (Winsford) or 01625 500644 (Macclesfield).

Word Limit

- Your Election Statement must not exceed the word limit. Every word no matter how small e.g. "I", "or", "we" etc. will be counted as one word.
- Numbers in a block will be treated as one word. For example "2011", "2007/2011".
- We would strongly advise all candidates not to use acronyms or initials. For example 'CWP NHSFT' would be 'Cheshire and Wirral Partnership NHS Foundation Trust.' Acronyms or groups of initials used however will be treated as one word.
- Compound or hyphenated words such as 'co-operation' will be treated as one word.
- Bullet points and numbering references are permitted and will not be counted as words.
- Words or phrases can be centered or indented. Boxes around particular words or phrases will not, however, be reproduced.
- Candidates' Election Statements will be printed using a common typeface and font size.

Section Three: Eligibility of Candidate

Cheshire and Wirral Partnership NHS Foundation Trust constitution and governance arrangements do not allow members to stand for election to the Council of Governors in the following circumstances:

- a person who has been adjudged bankrupt or whose estate has been sequestrated and (in either case) has not been discharged;
- a person who has made a composition or arrangement with, or granted a trust deed for, his creditors and has not been discharged in respect of it;
- a person who within the preceding five 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 three months (without the option of a fine) was imposed on him;
- a person who is a chairman, non-executive or executive director of the Trust or a person who is a chairman, governor, non-executive or executive director of another NHS body;
- they are the spouse, partner, parent or child of a member of the Board of Directors of the Trust;
- they are a member of a local authority's Scrutiny Committee covering health matters;
- they are a member of a service users' forum unless that forum is a partnership organisation which has appointed them as a partnership governor,
- they have previously been removed as a Governor pursuant to paragraph 12 of Annex 6 of the Trust's Constitution;
- being a member of the public constituency or the service user/carer constituency, they refuse to sign a declaration of particulars of their qualification to vote as a member and that they are not prevented from being a member of the Council of Governors;
- they are subject to a sex offender order, and/or their name is included in the Sex Offenders register;
- they have within the preceding two years been dismissed, otherwise than by reason of redundancy, from any paid employment with an NHS body;
- a person whose tenure of office as a chairman or as a member or director of an NHS body has been

terminated on the grounds that their appointment is not in the interests of the health service, for non-attendance at meetings or for non-disclosure of a pecuniary interest.

Section Four: Declaration of Candidate

I hereby declare that I am a member of Cheshire and Wirral Partnership NHS Foundation Trust and wish to stand as a Governor in the forthcoming election for the Council of Governors 2014.

I declare that as at the date of the notice of election, I am a member of the constituency in which I am seeking election, and meet the eligibility criteria for that constituency as detailed in the Trust's constitution.

I declare that I have been a Member of Cheshire and Wirral Partnership NHS Foundation Trust for a period of at least 12 months on the last day of the nomination process.

I declare that I am at least 16 years of age.

I declare that none of the ineligibility criteria set out in Section Three apply to me.

I agree to undergo a Disclosure and Barring (DBS) check if elected. All successful candidates must undergo a DBS check. Seats can only be taken up subject to the DBS check being satisfactory.

I confirm that I will comply with the Trust's code of conduct for governors (available at www.cwp.nhs.uk).

I confirm that, to the best of my knowledge, the information provided on (or in conjunction with) this form is true and correct.

I confirm that I understand the position of governor is unpaid but that I will be entitled to claim reasonable expenses incurred in connection with the role.

Signature of Candidate:

Date:

Important notes for all prospective candidates

- It is the responsibility of candidates to ensure that this form arrives before the closing date.
- We recommend that you confirm its safe receipt by contacting the Returning Officer at **Idox Elections** on 028 7137 1111.
- All nomination forms will be acknowledged within two working day of receipt, by first class post to the address provided.
- If you need any further advice or information about completing this form please contact the Returning Officer at **Idox Elections** on 028 7137 1111.

Simple checklist for candidates

- | | |
|--|--------------------------|
| Have you completed all parts of Section One? | <input type="checkbox"/> |
| Have you completed all parts of Section Two? | <input type="checkbox"/> |
| Have you attached a photo? | <input type="checkbox"/> |
| Have you emailed a photo? | <input type="checkbox"/> |
| Have you emailed a candidate statement? | <input type="checkbox"/> |
| Have you attached a candidate statement? | <input type="checkbox"/> |
| Have you signed and dated the declaration in Section Four? | <input type="checkbox"/> |

Request Constitution/Election Rules

If you would like a copy of the Trust's Constitution/Election rules emailed or posted to you, please tick the appropriate box below:

- Emailed
Posted