APPENDIX A - APPLICATION FOR CO-OPTION TO RINGSHALL PARISH COUNCIL

Thank you for your interest in becoming a Councillor. Please provide the information below to assist the Parish Council in making their decision.

Title	Full Name	
Home Address		
Home Telephone No.		
Mobile Telephone No.		
Email Address		
About You		
Please provide the Counc	cil with some pertinent bac	kground information about yourself.

	Applying		
Please provi	de the Council with your reason	ns for wanting to become a Parish Councillo	r.
Signature			
/	tion also requires signatures of	two registered electors (known as a propose	
our applica			r and a
	om the parish.		r and a
	om the parish. Proposer	Seconder	r and a
econder) fro			r and a
econder) fro			r and a
econder) fro			r and a
			r and a

Council's website.

The information provided on this application will remain Strictly Private and Confidential.