



Council Offices ▪ Pine Grove ▪ Crowborough ▪ East Sussex TN6 1DH
Telephone 01892 652907 ▪ VAT No: 210 4938 90

CO-OPTION TO CROWBOROUGH TOWN COUNCIL

To stand for co-option to become a town councillor you must be:

1. At least 18 years old on the day of your nomination, **and**
2. A British citizen, an eligible Commonwealth citizen or a citizen of any other member state of the European Union

You must also meet **at least one** of the following four qualifications (from S.79 of Local Government Act 1972):

1. From the day of your nomination onwards, you are, and will continue to be, registered as a local government elector for the parish area
2. For the 12 months preceding the day of your nomination and election, you have been the owner or tenant any land or other premises in the parish area
3. For the 12 months preceding the day of your nomination and election, your main or only place of work has been in the parish area
4. For the 12 months preceding the day of your nomination and election, you have lived in the parish area or within three miles of it

DISQUALIFICATIONS FROM STANDING

In accordance with S.80 of the Local Government Act 1972, there are certain people who are disqualified from being elected/co-opted to a town council.

You cannot be a candidate if at the time of your nomination and on the day of the election, **any** of the following are true:

1. You are employed by the town council or hold a paid office under the town council (including joint boards or committees)
2. You are the subject of a bankruptcy restrictions order, an interim bankruptcy restrictions order, a debt relief restrictions order or an interim debt relief restrictions order under Schedule 4ZB of the Insolvency Act 1986
3. You have been sentenced to a term of imprisonment of three months or more (including a suspended sentence), without the option of a fine, during the five years before polling day
4. You have been disqualified under the Representation of the People Act 1983 (which covers corrupt or illegal electoral practices and offences relating to donations) or under the Audit Commission Act 1998

CO-OPTION ELIGIBILITY FORM

USE OF PERSONAL INFORMATION

I understand that Crowborough Town Council will use the information provided on this form to assess my eligibility to be a town councillor. I consent to the use and disclosure of my information as included in this form.

PRINT NAME:

SIGNATURE:

DATE:

DECLARATION OF ELIGIBILITY AND CONSENT

I confirm that (please tick all which apply to you):

I am 18 years of age or over	
I am a British citizen; or a citizen of the Commonwealth; or a citizen of any other member state of the European Union	
I am, and will continue to be, registered as a local government elector for the parish area	
For the 12 months preceding the day of this nomination, I have been the owner or tenant of land or other premises within the parish area	
For the 12 months preceding the day of this nomination, my main or only place of work has been within the parish area	
For the 12 months preceding the day of this nomination, I have lived within the parish area, or within three miles of it	

I hereby declare that I am eligible to stand for co-option to Crowborough Town Council and that I am not disqualified from being a town councillor under S.80 of the Local Government Act 1972.

PRINT NAME:

SIGNATURE:

DATE:

CO-OPTION APPLICATION FORM

PERSONAL DETAILS

TITLE:	
NAME:	
ADDRESS:	
TELEPHONE NUMBER/S:	
EMAIL:	

WARD SELECTION

I wish to be considered for co-option in the following ward/s (please tick):

Crowborough (Crowborough SOUTH EAST) Ward	<input type="checkbox"/>
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POLITICAL AFFILIATION

Are you standing on behalf of a political party? (please tick)

Conservative	<input type="checkbox"/>	Liberal Democrats	<input type="checkbox"/>
Green	<input type="checkbox"/>	Other (please state)	<input type="checkbox"/>
Labour	<input type="checkbox"/>	Independent	<input type="checkbox"/>

INFORMATION IN SUPPORT OF YOUR CO-OPTION APPLICATION

Please explain briefly why you are interested in becoming a town councillor.

Please detail any experience you may have which is relevant to Crowborough Town Council.

I hereby declare that the information provided on this form is true and correct. I understand that any wilful dishonesty will render this application void.

PRINT NAME:

SIGNATURE:

DATE:

Please return the Co-option Eligibility form and Application form to:

Caroline Miles
Town Clerk
Crowborough Town Council
Council Offices
Pine Grove
Crowborough
East Sussex
TN6 1DH

Clerk@crowboroughtowncouncil.gov.uk

You will also be required to provide two forms of identification:

1. Photographic identification (such as a passport or driving licence)
2. Proof of address (such as a utility bill)

For further information on co-option or becoming a town councillor, you may like to:

- Read the Councillor Person Specification (www.crowboroughtowncouncil.gov.uk)
- Read Crowborough Town Council Co-Option Policy (available at www.crowboroughtowncouncil.gov.uk or by calling 01892 652907)
- Visit the 'Becoming a councillor' page on our website (www.crowboroughtowncouncil.gov.uk)
- Speak to the Town Clerk (please call 01892 652907 to arrange an appointment)