

APPLICATION FORM

Member Nominated Trustee Director

Name:

National Insurance Number:

Date of Birth:

I wish to be considered for the position of
Member Nominated Trustee Director.

Email

Telephone:

**What is your current job title and name of your
employer? (If you're retired or not currently
employed, please state this)**

Signature (please type your full name):

Date:

I confirm the following:

- I do not work for a competitor of Siemens.
- I agree to undertake the necessary trustee training.
- I have not been disqualified from acting as a Company Director under the Company Director's Disqualification Act 1986.
- I have read the 'Your guide to becoming a Member Nominated Trustee Director'.
- I have completed the Sponsor Form (overleaf).
- I enclose a note (not more than one side of A4 paper) outlining my credentials for the office of Trustee.

Once you have filled in both sections of this form, please save it to your device and email a copy to: siemens@thpa.co.uk along with your note outlining your credentials.

The closing date for applications is
16 September 2022.

Sponsor Form

Name: _____

National Insurance Number: _____

Date of Birth: _____

Each of your sponsors needs to be a member of the Siemens Benefits Scheme. If you have lost contact with members, the Scheme's administrator, Trafalgar House, will be able to pass on your details to other members.

My sponsors are:

Name: <input type="text"/>	Phone number or email address: <input type="text"/>
Job title / employer: <input type="text"/>	National Insurance Number: <input type="text"/>
<small>(If retired or not currently employed, please state this)</small>	

Name: <input type="text"/>	Phone number or email address: <input type="text"/>
Job title / employer: <input type="text"/>	National Insurance Number: <input type="text"/>
<small>(If retired or not currently employed, please state this)</small>	

Name: <input type="text"/>	Phone number or email address: <input type="text"/>
Job title / employer: <input type="text"/>	National Insurance Number: <input type="text"/>
<small>(If retired or not currently employed, please state this)</small>	

Name: <input type="text"/>	Phone number or email address: <input type="text"/>
Job title / employer: <input type="text"/>	National Insurance Number: <input type="text"/>
<small>(If retired or not currently employed, please state this)</small>	

Name: <input type="text"/>	Phone number or email address: <input type="text"/>
Job title / employer: <input type="text"/>	National Insurance Number: <input type="text"/>
<small>(If retired or not currently employed, please state this)</small>	