



APPLICATION FORM

INDEPENDENT ADVISORY GROUP (IAG) MEMBER

Full Name:			
Address:			
	Postcode:		
Home Tel:		Daytime Tel:	
Mobile:			
Email:			

1. Please give a brief outline explaining why you are interested in becoming an IAG member:

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[Empty rectangular box for response]

2. Taking into account the IAG Role Profile and Role Specification document supplied, please tell us what skills, experience and qualities you feel that you would bring to the IAG:

[Empty rectangular box for response]



3. Please provide detail of any further information in support of your application which has not been covered by the above questions:

Declaration

I declare that the information I have given in support of my application is, to the best of my knowledge and belief, true and complete. I understand that if it subsequently discovered that any statement is false or misleading, or that I have withheld relevant information, my application may be disqualified or, if I have already been appointed, my appointment may be terminated.

Name (Printed)

Name (Signature)

Date (DD/MM/YY)



Please return your completed application form and personal information form to:

Email: equalityanddiversity@dyfed-powys.pnn.police.uk

**Post: Equality and Diversity Team,
Dyfed-Powys Police,
Police Headquarters,
PO Box 99,
Llangunnor,
Carmarthen,
SA31 2PF**

Should you wish to dictate your application to us over the telephone, please contact the Equality and Diversity team on **07970831460**

This document can be provided in other formats such as large print, braille, audio and by email. Please contact the Equality and Diversity team at equalityanddiversity@dyfed-powys.pnn.police.uk or 07970831460 to obtain alternative accessible formats.