**BAWDESWELL PARISH COUNCIL**

**Co-option Application Form**

**Name: ……………………………………………………………………………………………**

**Address for Correspondence: …….……………………………………………………..................................**

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**..……………………………………………………………………………………….**

**Postcode: ……………………………………….**

**Telephone:. …………………………….………..……………..**

**Email:………………………………………………………………**

**Are you 18 or over? YES/NO**

**Please detail any experience you have that may be relevant to Bawdeswell Parish Council.**(If necessary, please continue on a separate sheet of paper).

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**Is there any other information you would like to disclose regarding your application?**

(If necessary, please continue on a separate sheet of paper).

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**Signed: ……………………………………Dated: ………...………………….…**

**Please return your completed form, together with the Co-option Eligibility Form to:**

Mrs Jo Boxall, White House, Pettywell, Reepham, NR10 4RN Email; bawdeswellpc@hotmail.com