



Jersey Gambling Commission

**APPLICATION FOR MEMBERSHIP OF THE BOARD OF COMMISSIONERS
PERSONAL DECLARATION FORM**

Please complete electronically, or in **BLOCK CAPITALS** and in black ink and then return this completed form to:

The Chief Executive (Private & Confidential)

**The Jersey Gambling Commission, 4th Floor, Osprey House,
5-7 Old Street, St. Helier, Jersey, JE2 3RF**



NOTES:

- The Commission reserves the right to also request any additional information necessary to ensure a person is fit and proper to become a member of the Board of Commissioners.
- Candidates who are successful following interview will be expected to complete a fuller Personal Declaration Form prior to being appointed. The form requests information regarding a person's background, proof of identity and allows the Commission to undertake a criminal record check. This information is **NOT** required at the application stage.

If there is insufficient space in any section within this form, please indicate and detail on an attached separate sheet.

All questions should be answered to the best of your knowledge and where information is not known or you cannot verify its validity, this should be noted.

- If a question does not apply, write "NOT APPLICABLE or N/A".
- If you have nothing to disclose in relation to a question, write "NIL".
- All dates should be in the form of DAY/MONTH/YEAR.

As part of our due diligence checks we will consider anything in the public domain related to your conduct or professional capacity. This will include us undertaking searches of previous public statements and social media, blogs or any other publicly available information. This information may be made available to the Recruitment Panel and they may wish to explore issues with you should you be invited to interview. The information may also be shared with Ministers.

The Commission may request and retain this data in accordance with the provisions of the Data Protection (Jersey) Law 2018, Article 45(2).

Information submitted by unsuccessful candidates not called to interview will be deleted at the completion of the recruitment.

Information submitted by candidates unsuccessful at interview will be deleted six months after completion of the recruitment.



Applicant Details

Section 1 – Personal Details

Title:

Surname:

Forenames:

Maiden or any former name(s), *(if applicable)*. Please provide an explanation for any former names *(e.g. marriage, adoption, etc)*:

Current residential address:

Postcode:

Country:



Applicant Details

Section 1 (continued)

Home Telephone (if applicable):

Mobile Number:

E-mail:

Date of birth:

Place and Country of birth:

Nationality:

Interview Availability:

((Please note any special requirements for or at the interview, e.g. disabled access, time restrictions.))

Please complete electronically or in **BLOCK CAPITALS** and in black ink



Applicant Details

Section 2 - Qualifications

Please give details of your Educational and/or Professional Qualifications.

Course, e.g. Diploma/Degree or equivalent	Dates: From/To	Course Title	Standard Attained

Professional/Technical/Special Training/Languages.

Qualification/Course	Training Organisation	Dates: From/To



Applicant Details

Section 2 (continued)

Please give a concise account of any training and development relevant to your application. This may be a role outside of employment, e.g. voluntary work.

Please give a brief account of any particular experience/knowledge/skills or competencies you have, which you consider would be especially useful in the post for which you are applying.



Applicant Details

Section 3 - Occupation

Please give details of your profession(s)/occupation(s) over the past 10 years, giving the names and addresses of all employers during this period and the nature and dates of employment including self employment.

Name and addresses of employers	Nature of business	Position held	Date(s) of Employment

List all directorships and company secretary roles.

Company Name, Number and Jurisdiction	Date of Appointment	Address



Applicant Details

Section 4 – Professional Memberships

Are you, or have you been, a member of any professional body relevant to this application?

Yes

No (go to section 5)

Does this professional body have any regulatory role over the activity of its members? If so, please provide the following details.

Name

Address

Post code

Membership number

Year admitted

Have you ever been subject to any disciplinary action by any of the bodies noted above? If so, please give full details.



Applicant Details

Section 4 (continued)

Have you, or any body corporate, partnership or institution with which you are, or have been associated as a director, controller, company secretary, partner or shareholder ever applied for a licence to operate gambling in any jurisdiction?

If so, please list all applications providing at a minimum: - date of application, type of licence, date of grant or refusal and if the licence is current or lapsed.

Have you, or any body corporate, partnership or institution with which you are, or have been associated as a director, controller, company secretary, partner or shareholder ever applied for a licence to operate in a regulated sector (*other than gambling*)?

If so, please list all applications providing at a minimum: - date of application, type of licence, date of grant or refusal and if the licence is current or lapsed.



Applicant Details

Section 4 (continued)

Have you ever been or are you currently the subject of any investigation or disciplinary procedure in relation to your business or professional activities? If so, give full particulars.

Have you ever been criticised, censured or disciplined by any organisation or body in relation to your business or professional activities? If so, give full particulars.

Have you ever been refused or had revoked a membership of any professional body or organisation of which you have been, or applied to be a member? If so, give details.



Applicant Details

Section 5 - Referees

Please provide the names and addresses of two referees. Neither referee must be family related. Ideally, one referee should be able to testify to your business acumen, professionalism and integrity and could be a lawyer, accountant or similar independent professional.

Name:

Address:

Postcode:

Country:

Email:

Name:

Address:

Postcode:

Country:

Email:



Applicant Details

Section 6 – Declaration/Consent

IMPORTANT NOTE

The information supplied within this declaration is for the purposes of assessing approval for Membership of the Board of Commissioners and will be retained in confidence and in compliance with the requirements of the Data Protection (Jersey) Law 2018.

Individuals completing this form are warned that the discovery of any material falsification or deliberate omission of information required may result in the application being refused. Pending a decision by the Selection Board, any changes affecting any of the information given in this application must be notified to the Commission without delay. Where material false particulars are discovered subsequent to the offer of a position on the Board, the Minister may suspend or revoke said position.

Applicants offered an appointment may be required to complete a waiver form enabling official access to certain personal financial information as well as other documentation regarding the applicant held by third parties. The validity of waivers will not exceed the duration of the application investigation.

The Commission retains the right to request further information if so required.

Telephone +44 (0) 1534 828540 Email: Dr Jason Lane (Chief Executive) - j.lane@jgc.je

Declaration

I hereby declare that the details I have provided as part of this application are correct and complete to the best of my belief. I understand that enquiries will be made to verify these details. I also understand that any false statements or the withholding of any relevant information may provide grounds for rejection of my application, or termination of my contract.

I agree that the Jersey Gambling Commission can contact my referees for a reference if, and not before I am offered a contract.

I accept that a contract will be subject to satisfactory checks, together with receipt of acceptable evidence of identity and of professional qualifications required for this position.

I understand that the Jersey Gambling Commission will create and maintain computer records on me during my contract, and may retain those records after my contract has ceased, subject to the Data Protection (Jersey) Law 2018.

Signature

Date



A large, empty rectangular box with a thin red border, intended for notes or a blank page.