APPLICATION FOR CO-OPTION AS A PARISH COUNCILLOR

Thank you for your interest in becoming a Parish Councillor. Please provide the information below to assist the Council in making its decision.

Full Name and Title	
Home Address	
Telephone	
Email Address	

Please explain why you wish to become a Parish Councillor.

Please outline any skills, experience, or community involvement that you feel would assist the Council.

Signature: _____

Proposer and Seconder

	Proposer	Seconder
Name		
Address		
Signature		

Co-option Eligibility Form

Please tick to confirm

☐ I am a British, Irish or qualifying Commonwealth Citizen, or a citizen of any other member state of the European Union.

☐ I am 18 years of age or over.

Please tick which qualification applies to you:

☐ I am registered as a local government elector for the parish.

☐ I have occupied land or premises in the parish for the previous 12 months.

☐ My principal or only place of work has been in the parish for the previous 12 months.

☐ I have lived in the parish or within three miles of it for the previous 12 months.

I confirm that I am eligible for the vacancy of Parish Councillor and that the information given on this form is true and accurate.

Signature: _____

Date: _____

All completed applications and eligibility forms must be received by the Parish Clerk (clerk@claygateparishcouncil.gov.uk) by 5.00pm on Friday 11 September 2026.

Or by post to:

Parish Clerk, Claygate Parish Council, Claygate Village Hall, Claygate KT10 0JP. (If delivering by hand, the post box is outside at the front ot the Village Hall)