SIX DEGREES SOCIAL ENTERPRISE COMMUNITY MEMBERSHIP APPLICATION FORM

The Directors
Six Degrees Social Enterprise C.I.C.
Floor 8, 2 City Approach
Albert Street
Eccles
Manchester
M30 0BL

Dear Company Secretary,

I wish to apply to be a community member of Six Degrees Social Enterprise. I request and authorise you to enter my name in the Company's register of community members.

Applicant's details

| Name: | |
|---|--|
| Address: | |
| | |
| | |
| Email: | |
| \Box I have read and understood the principles of being a community member | |
| I'm eligible to become a community member as I meet the following criteria (tick only one option): | |
| \square I am a service user (that is to say, a person who received the mental health service provided by the organisation), or have been a service user within six months prior to my application. | |
| $\hfill \square$ I am a carer of a person who is or has been a service user within six months immediately prior to my application. | |
| ☐ I am a registered volunteer. | |
| ☐ I am someone who lives or accessed services in the areas served by NHS Salford. ☐ I am someone (other than a staff member) whom the Board approves, at their discretion, on the grounds that such a person would make or has made a positive contribution to the Company's Board or Membership. | |
| Signed: | |
| Date: | |