

ACTIVE CALDERDALE COMMUNITY PANEL FORM

THANK YOU FOR SHOWING INTEREST TO BE ON THE LOCAL COMMUNITY PANEL FOR THE ACTIVE CALDERDALE WORK IN YOUR LOCAL AREA.

Being on the community panel is a very exciting opportunity where you will represent your local area and shape the conditions that can enable people to be physically active.

The role will involve:

- Bringing the voice of your community into the decision-making process, helping to get investment and support where the need and opportunity is greatest.
- Meeting with the panel to review and make decisions on the success of investment proposals.
- Supporting the development of proposals that aren't yet in the position of approval e.g. providing feedback on how to progress proposals to the required standard.
- Advocating for successful proposals in your community using your connections locally.
- Supporting Active Calderdale to link up with other work and opportunities happening in the local area.
- Checking in on projects you have approved and support where necessary to promote sustainability.
- Supporting the Active Calderdale agenda by attending 'We Are All Active Calderdale' quarterly partnership meetings in your area and leading the way by promoting physical activity.
- Supporting local organisations to embed physical activity promotion into what they do.

The role of a panel member will normally take 3-4 hours of your time each month and will involve face to face and virtual meetings as required. These times will be discussed with you in advance. If you require any assistance or support with travel, please do let us know.

To be eligible you must live or work in your local area and have good knowledge of the things that can help the community be active such as streets, parks, green spaces and local sport and physical activity opportunities. It is also essential to have knowledge of local organisations in the locality that are not traditionally associated with sport or physically activity but could help promote opportunities to residents.

If you are interested in representing your community on the Active Calderdale Community Panel, please submit this form to your Active Calderdale Project Manager:

Anthony.Whittaker@calderdale.gov.uk

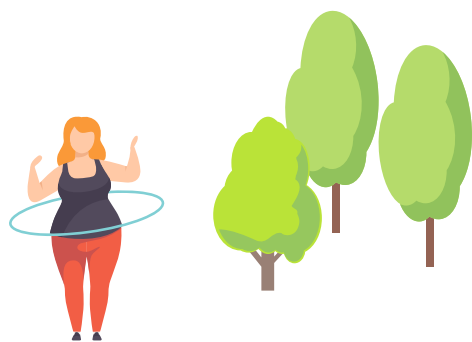
(Rastrick, Elland, Brighouse, Lightcliffe, Park Ward)

Sofie.Armitage@calderdale.gov.uk

(Mixenden, Ovenden, Illingworth, Lee Mount, Boothtown, Warley)

Emma.Carter@calderdale.gov.uk

(Cornholme, Sowerby & Sowerby Bridge, Siddal, Town Centre)



PERSONAL DETAILS:

Name:

Contact preference: Email Phone

E-mail:

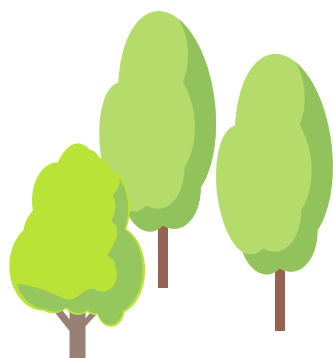
Phone No:

Which of the following areas are you applying for?

Please select one of the options below:

- | | |
|---|---|
| <input type="checkbox"/> Rastrick | <input type="checkbox"/> Elland |
| <input type="checkbox"/> Brighouse & Lightcliffe | <input type="checkbox"/> Park |
| <input type="checkbox"/> Warley | <input type="checkbox"/> Cornholme |
| <input type="checkbox"/> Sowerby & Sowerby Bridge | <input type="checkbox"/> Boothtown |
| <input type="checkbox"/> Mixenden | <input type="checkbox"/> Ovenden, Illingworth & Lee Mount |
| <input type="checkbox"/> Siddal | <input type="checkbox"/> Town Centre |

What is your occupation (e.g., what it is you do and who for)





COMMUNITY PANEL:

Why do you want to be on the community panel?

[In no more than 300 words please include the reasons why you would like to be on the panel, what knowledge and skills you could bring]

What is important to you about your community?

[In no more than 100 words please tell us what is important to you about your community. This could include the people, opportunities and how your community looks]

Do you have any conflicts of interest

E.g., any personal interests (family, friendships, financial or social factors) that could impact your judgement on decisions?

Yes No

If yes, please provide further details:

EQUALITY MONITORING FORM:

One of Active Calderdale’s core aims is to reduce inequalities and discrimination with regards to physical activity opportunities. To help us to create a panel that represents our diverse communities and under-represented groups, we require all our applicants to complete our Equality Monitoring form. Monitoring is an essential part of the process and, if done effectively, will help us check whether our policies, services and organisational culture are meeting the needs of our community. The information you provide will be kept confidential and will only be used by our departments and service areas. Visit active.calderdale.gov.uk for further information on the Active Calderdale approach and to read our full [privacy policy](#).

Completion of this form or any part of it is voluntary (Please tick the appropriate box)

What is your age? Under 25 25-34 35-54 55-64 65+

Do you consider yourself to have a disability? Yes No

What is your sex? Male Female

Is the gender you identify with the same as your sex registered at birth? Yes No

Which of the following best describes your sexual orientation?

- Heterosexual/straight (a man attracted to a woman)
- Gay man (a man attracted to a man)
- Gay woman/lesbian (a woman attracted to a woman)
- Bisexual (a man attracted to both a man and a woman or a woman attracted to both a man and woman)
- Other Prefer not to say

What is your ethnic group?

A White

(Please tick the appropriate box)

- British
- Irish
- Gypsy or Irish Traveller
- Roma

Any other White background please describe below:

B Mixed/Multiple ethnic groups

(Please tick the appropriate box)

- White and Black Caribbean
- White and Black African
- White and Asian

Any other Mixed/Multiple ethnic background please describe below:

EQUALITY MONITORING FORM CONTINUED:

What is your ethnic group?

C Asian or Asian British

(Please tick the appropriate box)

- Indian**
- Pakistani**
- Bangladeshi**
- Chinese**

Any other Asian background please describe below:

D Black /African/Caribbean/Black British

(Please tick the appropriate box)

- White and Black Caribbean**
- White and Black African**
- White and Asian**

Any other Black/African Caribbean background please describe below:

What is your ethnic group?

E Other ethnic groups

(Please tick the appropriate box)

- Arab**

Any other ethnic group please describe below:

What is your religion or belief?

(Please tick the appropriate box)

- | | | |
|---|--|---|
| <input type="checkbox"/> Christian | <input type="checkbox"/> Atheist | <input type="checkbox"/> Muslim |
| <input type="checkbox"/> Hindu | <input type="checkbox"/> Sikh | <input type="checkbox"/> Prefer not to say |
| <input type="checkbox"/> Jewish | <input type="checkbox"/> Agnostic | |
| <input type="checkbox"/> No religion | <input type="checkbox"/> Buddhist | |

Other please state below: