

# INTENT OF APPLICATION FORM

Please complete in type script and return with a scanned head and shoulders photo of yourself

## 1. CONTACT DETAILS

Surname:  Forename:

Middle name:  Known as:

Title:  Previous name (if any):

Home address (including County and postcode):

Email address (please use a personal email address):

Mobile number:  Home telephone:

Work telephone:  Nationality:

Please only complete the email and phone boxes if you consent to being contacted in this way

## 2. PREVIOUS APPLICATIONS:

Have you applied before?:  Yes  No

If yes, when?:

Did you attend a PAB and when?:  Yes  No

## 3. PARTY MEMBERSHIP:

Date joined the Party:  Membership number:

Association:

Last Payment Date:

## 4. CURRENT OCCUPATION:

## 5. POLITICAL EXPERIENCE:

## 6. VOLUNTARY AND COMMUNITY WORK:

Date form completed:

**Please return to:** [candiateenquiries@conservatives.com](mailto:candiateenquiries@conservatives.com)