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| Applicant Unique Identification Number (office use): |
| 1: What is your name? |
| 2: Please can you confirm that you live in one of the boroughs of North Central London? |
| 3. Please enter your email address |
| 4: Please confirm alternative contact details (address/Inc. postcode and phone number) |
| 7. Please use this section to provide information (in under 600 words) on the following:   1. why you are interested in being a Resident Champion   (2) the skills, knowledge and experience you have that meet the requirements set out in the recruitment pack and  (3) any other volunteer or patient advocacy roles or experience (although this is not essential to the role) |
| 8. We are keen to appoint individuals with experience of using North Central London health and care services. Please include any additional information you feel would be helpful to share regarding using local services in recent years. This can include in the capacity of a carer. |
| 9. Please tell us if you would need any extra support to participate in the NCL committees / group and what kind of help you would need? |
| 10. Please provide details if you currently have a paid or unpaid role? |
| 11. If you have any business or personal interests that could lead to a real or perceived conflict of interest were you to be appointed as a Resident Champion, please provide details in your application. You should particularly note the requirement for you to declare these interests on appointment, which will be entered into a register available to the public. |
| 12. If you answered yes to the previous question - please can you give further details. |

**Please send any questions or your completed application to** [**nclicb.dagr.recruitment@nhs.net**](mailto:nclicb.dagr.recruitment@nhs.net)