

**Fellowship Panel Members
Application Form for Public Members**

Contact details	
Title:	
Name:	
Address:	
Postcode:	
Country:	
Telephone No:	
Email Address:	

Please list a summary of any voluntary roles held (insert additional rows if required):

Dates	Role	Organisation name

Please list a summary of your employment history (insert additional rows if required):

Dates	Role	Organisation name

I confirm that I am not a practising or retired social care or health professional (double click in the grey box and select the default value 'checked').

Reasons for applying: Please tell us about your reasons for wanting to apply (maximum 500 words).

Note to applicants: Applications will be shortlisted against the **Person Specification** at the end of this document. Please ensure you refer to the person specification when completing this part of the application form, telling us about your specific knowledge, skills and experience that you feel are relevant to the role.

Knowledge: Please tell us how your knowledge base matches the person specification for this role: (maximum 500 words).

Skills: Please tell us about how your skills match the person specification for this role: (maximum 500 words).

Experience: Please tell us about how your experience matches the person specification for this role (maximum 500 words).

References: Applicants who are invited to take part in a short (up to 30 minutes) informal telephone interview will be asked to provide two references. Those providing a short reference will be asked to explain why they think you would be suitable for the role applied for and what benefits you are likely to bring to discussion.

I confirm that I have identified and asked permission from individuals to pass on contact details and provide a reference (double click in the grey box and select the default value 'checked').

How did you hear about this role?

Please tick here if you would be interested in reviewing research proposals for Health and Care Research Wales (double click in the grey box and select the default value 'checked').

Submitting your application:

1. Please ensure your application form and CV includes your name in the file name, for example:
 - i. A Thomas application form.docx
 - ii. A Thomas CV.docx
2. When completed attach the application form and your CV to an email and send it to: email wales@soton.ac.uk
3. All applications must be received by: **Friday 25th October 2019 at 13:00hrs.**

If you have any queries then please email wales@soton.ac.uk, or call a member of the team on 023 8059 1925.

The General Data Protection Regulation 2016 (GDPR)

Health and Care research Wales complies with the requirements of the GDPR and is committed to upholding the data protection principles and the rights of individuals. Health and Care Research Wales, the Welsh Government, is the Data Controller under GDPR 2016. Under GDPR we have a legal duty to protect any information we collect from you.

You should be aware that information given to us might be shared with other Welsh Government bodies for the purposes of statistical analysis and other Health and Care Research Wales, Welsh Government management purposes. Applicants may be assured that Health and Care Research Wales, Welsh Government, is committed to protecting privacy and to processing all personal information in a manner that meets the requirements of the Act.