Please email HR@rcm.org.uk if you require an accessible format of this expression of interest form.

**Service User Chair**

**v 0.2**

RCM Maternity Partnership Network

v 0.1

## Guidance:

Please read the **information pack** before completing this form, to ensure you fully understand the expression of interest process and what we are looking for.

Please note the closing date for all expressions of interest is **Monday 14 October at 5pm**.

**Please complete and return this expression of interest form, along with the Equal Opportunities Monitoring Form to** HR@rcm.org.uk.

## About you:

|  |  |
| --- | --- |
| Full name | Preferred name |
|  |  |
| Address | Daytime contact telephone number |
|  |  |
| Mobile telephone number |
|  |
| **Are you aged 18 or over?** |
| Yes / No (please delete as applicable) |
| Postcode | If appointed, how soon can you start? |
|  |  |
| Are you able to access email?  | **Email address** |
| Yes / No (please delete as applicable)If no, please also state your preferred method of communication. |  |
| **Please select the option that best applies to you.** |
| I am a: [ ]  Maternity patient or maternity service user (current or previous) [ ]  Carer of a patient currently / previously using maternity services [ ]  Representative of a patient organisation (please state which)[ ]  Other (please state): |
| Availability |
| Are you able to take part in meetings during the day? Usually this will be between Monday-Friday 8am and 6pm. Yes / No (please delete as applicable). |
| Are you able to commit to the time commitment outlined in the information pack?Yes / No (delete as applicable). Comments:  |
| Disability considerations |
| If you have a disability, please indicate whether you would need any arrangements to be made if you were invited to a selection meeting. Please contact the HR Officer on 0300 303 0444 or email hr@rcm.org.uk for any queries about this. |
| Are you able to use telephone, email and the internet to communicate and take part in meetings? We want to make our meetings as inclusive as possible so please let us know if you have any training or support needs.Yes / No (delete as applicable). Any comments:  |
| How did you find out about this role?  |
| [ ]  Social media[ ]  Midwives magazine[ ]  Word of mouth[ ]  Other, please explain: |

## Your Relevant Skills and Experience

You should refer to information provided in the **Information Pack** before completing this section.

|  |
| --- |
| Please tell us about why you are interested in working with the Royal College of Midwives.We suggest you do this in about 100 words. |
| Please tell us about any organisations or networks relevant to maternity care services that you have an interest in or are a part of.We suggest you do this in about 100 words. |
| Please tell us your experience of giving a service user voice perspective.We suggest you do this in about 200 words. |
| Please tell us about any other experience or skills you have which would support your expression of interest. You should refer to the service specification section of the information pack.We suggest you do this in up to 300 words. |

## Data Protection Statement- How we store your data

The information in this expression of interest form will be held securely both manually and on the RCM’s computerised system and will only be divulged to necessary staff members for the purpose of the selection process. Information on the successful candidate may be held for up to 7 years following engagement of services. Information on unsuccessful candidates will be held for up to 6 months. We reserve the right to verify the information you have provided and seek information from other sources. The above rules have been assessed in line with the General Data Protection Regulations 2018. You can find the RCM’s privacy policy relating to your rights regarding how we handle your data here: <https://www.rcm.org.uk/rcm-privacy-policy>. The information on the Equal Opportunities Monitoring Form will only be used for monitoring our equal opportunities policy. Any information required for statistical analysis will be used anonymously.

**Declaration**

### I declare that all the information given in this expression of interest form is, to the best of my knowledge, complete and correct.

Signature:

Date:

Please complete and return this expression of interest form, along with the **Equal Opportunities Monitoring Form** to HR@rcm.org.uk before the closing date.

Those shortlisted will be notified by email with details of the selection discussion.

If you have not heard within 3 weeks of submission of your expression of interest, you should assume you have not been shortlisted.

**Thank you for your interest**