**Application form April 2021**

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| PERSONAL DETAILS\* |

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| Name |  |
| Telephone no.  |  |
| Email address |  |
| College membership no.  |  |
| Appointed to Current post |  |
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| **Employment details** |
| Employer/Organisation |  |
| Position/job title/role |  |

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| Please provide a short statement outlining the personal skills, experience and attributes you would bring to the position and why you feel you would be a suitable candidate as a Cataract Advisory Group Member (limited to 500 words) |  |

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| **To be completed by the applicant**  |

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| I can confirm I have attached my CV**Please note all application information will be forwarded to the shortlisting panel.** |  |
| Signature (electronic signature accepted) |  |
| Date |    /    /     DD MM YYYY |

**Please return by 17:00 on Thursday, 13 May 2021 to:** **noa.project@rcophth.ac.uk**