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| LOCSU Leadership Module 2022Application Form for a funded place |

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| **Personal Details** |
| First name:  | Surname:  |
| Home address:  |
|  | Postcode: |
| Contact number: | Date of birth (for cert):  |
| Email address:  |

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| **Education and Qualifications** |
| College/University: |  |
| Study dates: |  |
| Qualification and grade: |  |
| Date obtained: |  |
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| College/University: |  |
| Study dates: |  |
| Qualification and grade: |  |
| Date obtained: |  |

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| **Professional Development** – please provide details of professional or other qualifications you have undertaken that is relevant to this application |
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| **Membership of Professional Institutions** |
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| **Membership of any LOCs** –please include details of any officer roles held |
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| **Employment History** – please provide details of your employment history starting with your current or most recent employer |
| Name of employer:  |
| Address:  |
|  | Postcode:  |
| Position held:  |
| Date started:  | Leaving date:  |
| Reason for leaving: |
| Description of responsibilities:  |
|  |
| Name of employer:  |
| Address:  |
|  | Postcode: |
| Position held:  |
| Date started:  | Leaving date:  |
| Reason for leaving: |
| Description of responsibilities: |
|  |
| Name of employer:  |
| Address: |
|  | Postcode: |
| Position held:  |
| Date started: | Leaving date:  |
| Reason for leaving: |
| Description of responsibilities: |

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| **Personal Statement** – please use this section to explain your personal and professional objectives in undertaking the Leadership Module, your research interests and how you intend using your leadership skills in the future |
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| **Telephone Interview** – please indicate which date(s) you can do for a 30-minute virtual callwith the Course Facilitator |
| **Tues 04/01/2022**: Y / NPreferred time(s):  | **Weds 05/01/2022**: Y / NPreferred time(s):  |
| *If you cannot do either date, please advise below of dates and times in that week that you can do, and we will let you know if we can accommodate you.* |

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| **References** – please provide names and addresses of two referees; one of whom should be a current LOC Committee member or a LOCSU Optical Lead |
| **Reference 1** | **Reference 2** |
| Name:  | Name:  |
| Job title:  | Job title:  |
| Organisation:  | Organisation:  |
| Contact tel no:  | Contact tel no:  |
| Email:  | Email:  |
| How is this person known to you? | How is this person known to you? |

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| **Reasonable adjustments**Please let us know if you require this application form in a different format or require any adjustments for the interview, which will be conducted via a call. |

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| **Statement of Confirmation by the applicant:** |
| *I confirm that by submitting this form to LOCSU, all the information given by me on this form is correct and accurate.*Date submitted:  |

***Please submit your completed form and a covering letter from your LOC Chair who should explain why you are a suitable candidate and what role you can play in the LOC following successful completion of the Leadership Skills module.***

*Please return to* jacquefooks@locsu.co.uk or post to:

Jacque Fooks, Office Manager, LOCSU, 2 Woodbridge Street, London EC1R 0DG