

**SCTS Honorary Treasurer application form**

|  |
| --- |
|  **Personal details.**  |

|  |  |
| --- | --- |
| Candidate Name |  |
| Current post & hospital |  |
| Mobile number: |  | E-mail Address: |  |
| Current SCTS member | Yes No  |

|  |
| --- |
| 1. **1. Describe your contributions to the specialty of cardiothoracic surgery and to the Society for Cardiothoracic Surgery (SCTS).**
 |
| No more than 300 words  |
| 1. **2. Describe your previous experience relevant to the Honorary Treasurer role.**
 |
| No more than 300 words  |
| 1. **3. If appointed, describe your proposed plans and vision for the future.**
 |
| No more than 300 words  |
| 1. **4. Provide any further information to support your application.**
 |
| No more than 300 words  |

**Declaration:**

I hereby confirm that the details above are correct and, if elected as SCTS Honorary Treasurer, to attend meetings on a regular basis. I confirm that I am in good standing with my employer and relevant regulatory bodies (GMC, IMC), and not subject to any current fitness to practice or disciplinary proceedings.

**Applicant signature:**

**Date:**

**Proposing member signature:**

**Proposing member:**

Please complete and return this form, as well as a brief CV, by email to emma@scts.org.

**Closing date for applications:** 26th September 2025