

**SCTS Nursing and Allied Health Professional sub-committee lead**

**Please confirm the position you are applying for: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |
| --- |
| **Personal details.**  |
| Candidate name |  |
| Current post & hospital |  |
| Mobile number: |  | E-mail address: |  |
| Current SCTS member |  |

|  |
| --- |
| 1. **1. Describe your contributions to the specialty of cardiothoracic surgery and, in particular, to NAHPs.**
 |
| No more than 300 words  |
| 1. **2. Describe your contributions to the Society for Cardiothoracic Surgery (SCTS).**
 |
| No more than 300 words  |

|  |
| --- |
| 1. **3. Describe the important challenges facing cardiothoracic NAHPs and how you would help to deal with these, if appointed.**
 |
| 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.

**Applicant signature:**

**Date:**

Please complete and return this form, as well as a brief CV and letter of support from your manager/employer, by email to emma@scts.org.

**Closing date for applications:** **10th February 2025**