

## **Queen's Nurse Programme**

## **Application Form 2024**

## **Data protection statement:**

Your privacy is important to us, and we will NOT pass your details to any third party. The Queen's Nursing Institute Scotland will only use the information provided on this form if we wish to contact you to verify the information you have provided. If your application is unsuccessful your personal data will be destroyed after six months. If your application is successful your data will be kept in accordance with GDPR. For more information on your privacy rights please see our privacy policy <a href="https://www.qnis.org.uk/privacy-policy">https://www.qnis.org.uk/privacy-policy</a> or contact <a href="mailto:comms@qnis.org.uk">comms@qnis.org.uk</a> for a copy.

All boxes will expand as you type.

1. PERSONAL DETAILS	
Surname	
First name	
Known as	
Title (e.g. Mr/Mrs/Ms/Miss/Other)	
NMC Registration Number	
Revalidation date	
Home address	
Mobile telephone number	
Home email address	
How did you hear about the QN Programme?	

EMPLOYMENT DETAILS					
Current job title					
Length of time in this role					
Employer					
Work address (full)					
Work telephone number					
Work email address					
Nominating Nurse Executive Director (NHS staff) or equivalent executive leader within your organisation:					
Name					
Email address					
Senior (Nurse) Manager acting as programme sponsor:					
Name					
Email address					

PROFESSIONAL AND HIGHER EDUCATION (Undergraduate and post-graduate of 1 year's						
length or more	2)					
Year	Institution			Qualification		
				1		
VEV BECBO	ICIDII I <del>TIEC IN CI</del>	IDDEN <del>T BOOT</del>				
KEY RESPON	NSIBILITIES IN CU	JKKENT POSIT	ION list briefly			
1.						
2.						
3.						
4.						

COMMUNITY NURSING EXPERIENCE – begin with position prior to current and detail your employment which demonstrates your experience in community based nursing roles							
Date	Position	Key responsibilities					
2 IN SLIDDOE	PT OF VOLID ADDITION — pla	ase read the excellence profile in the guidance					
		of <b>how</b> your expertise matches the areas					
	e remember this is not a job application						
	s, rather your ability to reflect and des ach statement begins with the question	cribe the impact of your skills and behaviours n HOW?					
•	made a difference?						
	how things are currently done g aspects of social injustice						
	making things better for individuals, families and communities						
- Helping Ot	neiping others to make a significant impact						
	(no more tha	n 3500 characters which is around 500 words)					

How	have you demonstrated your tenacity and resilience? finding your way across boundaries, around obstacles, through bureaucracy
•	successfully challenging attitudes
•	finding new doors to open each time one closes
•	being prepared for continuous change, development and transformation
	(no more than 3500 characters which is around 500 words
How	have you brought people with you?
•	using your enthusiasm and persuasive nature
•	creating a ground swell of support and getting others to commit and get things done
•	staying connected with important others
•	working with crisis as a development opportunity.
	(no more than 3500 characters which is around 500 words

approaching life reflectively, always learning quick to attribute success to others and not seek credit showing kindness for yourself and others  (no more than 3500 characters which is around 500 wo  WHAT IS YOUR VISION for the role of Queen's Nurses in Scotland's communities and why would you like to be selected for this year's cohort? Do you have a vision of what the best you can be looks like and feels like and the changes you would like to see in the community you wor with?	•	have you demonstrated your ability to reflect?  listening deeply, seeking to understand what really matters
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	W	ould you like to be selected for this year's cohort? Do you have a vision of what the <i>best you</i>
with?		
	Wi	ith?

(no more than 3500 characters which is around 500 words)

4.	YOUR ISSUE FOR DEVELOPMENT — please read the guidance document and tell us about the issue you have agreed with your sponsor which you will develop over the course of this programme. Please set out the nature of the issue or community need you wish to focus on and explain how this addresses health inequity. Please tell us who will be involved, how you plan to engage those affected and what you hope might be achieved, whilst recognising that the emphasis is on co-production so plans will emerge as you listen to the views of individuals,
	(no more than 4000 characters which is around 550 words)

Please check your completed application before it is emailed to QNIS.

**All sections** must be completed or the application cannot be put forward to the assessment panel.

Please send your completed application forms along with your signed organisational support form to: janet.mcarthur@qnis.org.uk no later than midday, Monday 15<sup>th</sup> November 2023.

## Equalities Monitoring Form Strictly Confidential



QNIS is committed to promoting fairness and eliminating discrimination from recruitment and selection practices. We will ensure that no applicant receives less favourable treatment either directly or indirectly, on the grounds of age, race, disability, gender, marital status, religion or faith or sexual orientation.

To monitor and audit the effective delivery of this commitment, QNIS requires all applicants to provide information asked for in this monitoring form. This will only be used for this purpose, will form no part of the interview process and will be treated in strict confidence, in accordance with Article 9 of GDPR.

The form will be detached from your application form and transferred to a database to help monitor the diversity of applications we receive. This will enable us to develop appropriate policies and procedures in respect of diversity and equal opportunities.

1.	Gender:	☐ Male ☐ Female		
2.	Date of birth:			
3.	Marital status:	☐ Married ☐ Single	Divorced	
	Other	(Please specify)		
4.	Nationality:			

	Wh A B C Mix D E F	British Irish Any other wh			 	M N P	Caribbe African Any oth <b>er ethni</b> Chinese	ner black back c groups e thnic groups	ground	
	G Asii H J K L	Other mixed an or Asian Bri Indian Pakistani Bangladeshi Other Asian b	tish packground			Z	Not sta	ted		
6.	<ul> <li>Disability is defined by the Disability Discrimination Act as;</li> <li>A physical or mental impairment, which has a substantial and long-term adverse effect on a person's ability to carry out normal day-to-day activities. The disability could be physical, sensory or mental and must be expected to last at least 12 months.</li> <li>Are you a disabled person as defined by the Disability Discrimination Act?</li> <li>Yes</li> </ul>									
7.	How would	you describe y	our religion or be	lief?						
	Christia	n 🗌	Buddhist		Hindu			Jewish		
	Muslim		Sikh		Non	ie		Prefer not to	say	
	Other (p	olease specify .						)		
8.	What of the	following desc	cribes your sexua	l orie	ntation?					
	☐ Bi-sexua	al 🗌	Gay		Hete	eros	exual		Le	esbian
	Other		Prefer not to	discl	ose					

5. How would you describe your ethnic origin?

Thank you for completing this form. Please return it with your application.