

**North Wales Regional Partnership Board**

**Service User/Individual Representative**

**Expression of Interest**

**NAME**

**ADDRESS**

**TEL Email**

**Data Protection – We will keep your contact details private/confidential. They will *only* be used for contacting you directly about recruitment on to the North Wales Regional Partnership Board and the process for membership. The content of your Expression of Interest may be shared/used with others during the Peer Selection Process. You will have an opportunity of sharing this in whatever way you wish.**

We would like you to describe your skills and experiences below. Please refer to the Role Description and/or other supporting membership documentation provided.

|  |
| --- |
| **1. We are looking for people who have strong involvement and influencing skills.** *Please describe what you have done in this area. Who were you trying to influence and/or involve and why? How did you use these skills? What was the outcome?* |
|  |

|  |
| --- |
| **2. We are looking for people able to draw on their own recent or current experiences of using health and/or social care services in North Wales to inform their role on the North wales Regional Partnership Board.** *Please outline some of your experience and how you would relate it to this role?* |
|  |

|  |
| --- |
| **3. We are looking for people who may be able to draw on existing networks that you are involved in and/or potential for reaching new people**. *Please describe your experience of this and how you would use it to benefit the Regional Partnership Board? Please mention if you are a member of another local or national organisation such as a charity, local group, etc* |
|  |

|  |
| --- |
| **4. We are looking for people who are able to work as part of a team.** *How do you or did you interact with other team members? Give an example of a success, and your part in it, including any problems and how they were resolved.* |
|  |

|  |
| --- |
| **5. We are looking for people who are highly motivated and committed.** *Please describe your interest in becoming a member of the Regional Partnership Board?* |
|  |

**Please answer all questions above.**

**If you do not have enough room within the form to write all you’d wish, additional pages may be attached**

Completed applications can be sent to [Catrin.Roberts@denbighshire.gov.uk](mailto:Catrin.Roberts@denbighshire.gov.uk)

County Hall

Wynnstay Road

Ruthin

LL15 9AZ

**Closing Date – Monday 20th September 2021**