

Cystic

Fibrosis worth a minute of your time

Quality Improvement Working Group

All completed application forms should be emailed to: QI@cysticfibrosis.org.uk or posted to Cystic Fibrosis Trust, QI team, One Aldgate, 2nd Floor, London, EC3N 1RE.

If you have any questions on completing the form, please contact the Quality Improvement team on the above email.

Personal details

Title (Mr, Mrs, Miss, Ms):

First name:

Last name:

Address:

Postcode:

Telephone number:

Email address:

You are applying for the role of Quality Improvement Working Group.

Please fill in the questions below:

Why are you interested in being part of the group?

What skills and experience will you bring to the role?

What experience, if any, have you had with improving quality of care/services?

Consent of data

In completing this form, you consent that the Cystic Fibrosis Trust will store and process the information you provide above in order to support your application to and membership of the Quality Improvement Working Group, such as contacting you about meetings of the group. We won't use your data for anything else, nor share it without your permission. For further details on how we keep your information safe, please see our privacy policy: cysticfibrosis.org.uk/privacy-policy.

We'd also love to be able to keep you updated about our wider work, including campaigning, petitions and fundraising. Under data protection law, we need your consent to do so. Say yes to getting involved in the fight for a life unlimited by cystic fibrosis, by calling us on 020 3795 2177 or emailing supportercare@cysticfibrosis.org.uk, and letting us know how you'd like to be contacted

Emergency contact information

In the event of an accident or emergency while volunteering with the Trust, please provide us with the name and contact details of someone we can contact should we need to.

Name:

Relationship to contact:

Telephone number:

Signature: _____ **Date:** _____

Cystic Fibrosis Trust

Equal Opportunities Monitoring Form

It is the policy of the Cystic Fibrosis Trust to ensure equal opportunity in the selection and recruitment of volunteers. It is our policy not to discriminate against any person because of race, colour, nationality, ethnic or national origin, religion, sex, sexuality, marital status, disability, union membership, age, or maternity

Applicants are therefore requested to tick the relevant boxes below to enable the Cystic Fibrosis Trust to monitor its equal opportunity policy. Monitoring is recommended by the relevant Codes of Practice and this information is used for no other purpose and will be treated as confidential.

How did you find out about this post?

Cystic Fibrosis Trust website

Cystic Fibrosis Care Centre

Social media

Email

Other (please state below)

Your ethnic origin

Asian

Asian/Asian British

Bangladeshi

Chinese

Indian

Pakistani

Other Asian background (specify if you wish)

White

British

English

Gypsy or Irish Traveller

Irish

Scottish

Welsh

Other white background (specify if you wish)

Black

African

Caribbean

Other Black background (specify if you wish)

White and Asian

White and Black Asian

White and Black Caribbean

White and Chinese

Other mixed background (specify if you wish)

Other ethnic group

Arab

Other ethnic group (specify if you wish)

Prefer not to say

Your gender

Male Female Prefer not to say

Have you ever identified as transgender?

Yes No Prefer not to say

Your age

16-24 25-34 35-44 45-54 55-64 65+ Prefer not to say

Marriage and civil partnership

Single Married/in a registered same-sex civil partnership Separated Divorced
Widowed Prefer not to say

Your sexual orientation

Bisexual Gay man Gay woman/lesbian Heterosexual

Other (specify if you wish):

Prefer not to say

Your religion or belief

No religion Buddhist Christian Hindu Jewish Muslim Sikh

Other (specify if you wish):

Prefer not to say

Disability

The equality Act 2010 defines a disabled person as someone who has a physical or mental impairment which has a substantial and long term adverse effect on their ability to carry out normal day-to-day activities.

Do you consider yourself to be disabled?

Yes

Please specify:

No

Prefer not to say

Please return this form to QI@cysticfibrosis.org.uk.