* Stage 1: Please complete the form and send it to louise@ukiscrs.org.uk
* Stage 2: Applications will be first-round reviewed and provisionally accepted, put on hold (depending of current Council Member numbers) or rejected by the Consultant Leads of UKISCRS YOP or their designates.
* Stage 3: Successful Applicants at stage 2 will have their application presented to the UKISCRS Full Council at their next Council meeting for final review and approval.
* Stage 4: Successful applicants will be notified of the result within 2-months of application.
	+ Though commonly YOP Council members commence their position at that year’s UKISCRS Annual Congress (~November), depending on the needs of the UKISCRS YOP Council at the time of application you may be invited to join the Council earlier.

|  |  |
| --- | --- |
| NAME: |  |
| Email address: |  |
| Home address: |  |
| Mobile phone number: |  |
| Social media profile link(s): |  |
| Photo: *(add to document or sent with the application)* |  |
| Hospital address at time of application: |  |
| Expected year of completing Training: |  |
| Position applied for within UKISCRS YOP | Full Council Member |  |
| Regional Representative |  |
| **Application Support Statement** (less than 250 words):*Your opportunity to present yourself, your skills, experiences and motivations to demonstrate why you would be a valuable addition to the UKISCRS YOP Council.*  |
| Statement: |

Notes:

* *A Council position is held for 3-years unless the Council Member ceases to be a Trainee.*
* *Maximum YOP Council numbers = 10*