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| **Application Form**  **Private and Confidential**  The information you provide on this form will only be used for the purpose of progressing your application, assessing your suitability for the role and to contact you.  On this occasion we will be sharing your information with the Welsh Government and Together for Children & Young People (T4CYP), but it will be held securely by Children in Wales.  **Application for:** Youth Board – Mental Health & Emotional Wellbeing – Whole School Approach  **PART 1: Personal Details**  **Full Name:…………………………………………………………………………………………………………………..**  **Email Address:…………………………………………………………………………………………………………….**  **Address**:………………………………………………………………………………………………………………………….  **Post Code**: ……………………………………  **Mobile phone number:**…………………………………………………………………………………………………..  **Date of Birth**:………………………………………………………………………………………………………………….  **Name of your school/college/youth forum** (if relevant)………………………………………………….  **PART 2: ABOUT YOU**   1. **Tell us a little about yourself and why you want to join the Youth Board (Up to 250 Words)** 2. **What would you bring to the Youth Board? *This doesn’t have to be experience with mental health services. We’re interested in your perspectives and your opinions – what you can offer that someone else can’t.* (Up to 150 Words)** 3. **Can you give an example of when you have spoken up on an issue that’s important to you? (100 words)** 4. **Do you have any direct experience (either yourself, a friend or a family member) with school-based wellbeing or mental health support?** 5. **What is your preferred language for participating in the group?** 6. **Do you have any specific support or access needs to help you fully participate in the group?**   **------------------------------------------------------------------------------------------------------**  **Reference:** Please provide one reference to support your application. This could be a teacher, youth worker, neighbour, someone who knows you well.  **Name:………………………………………………………………………………………………………………………….**  **How do you know this person?......................................................................................**  **Contact telephone number and/or email address:……………………………………………………….**  **----------------------------------------------------------------------------------------------------------------------------**  **Signed: Date:**  **Please email this form attached to: lynne.hill@childreninwales.org.uk by Thursday 10th January 2019.­**  **Thank-you / Diolch ☺**  Children in Wales, 25 Windsor Place, Cardiff CF10 3BZ telephone: 029 2034 2434 www.childreninwales.org.uk |