**LEADING SELF PROGRAMME**

**Application Form**

***‘Your leadership depends on you. You can only be a***

***great leader when you can lead yourself well first’***

Richard Norris

Self-leadership is the practice of understanding who you are, identifying your desired experience and intentionally guiding yourself towards them. It spans the determination of *what* we do, *why* we do it, and *how* we do it. No matter your role, we can all be leaders wherever we work in WUTH, and this principle will be explored throughout the programme.

The *WUTH Leadership for All: Leading Self Programme* in an interactive programme offering opportunities to staff who may not have ‘formal’ leadership responsibility, to gain some insight into leadership principles and explore how they can be a role model for these in the context of their role.

Participants will leave with a greater understanding of their own values and how these can motivate ourselves and help guide others, as well as developing their ability in key leadership skills such as communication, followership and empowerment.

The time commitment for this programme is 2 full days, plus a commitment from participants to complete two further short personal development courses of their choice from the [Leadership for All Masterclass Series](https://www.wuth.nhs.uk/your-wuth/education-development/leadership-for-all/leadership-for-all-masterclasses/) or [Staff Education Directory](https://www.wuth.nhs.uk/media/15438/wuth-staff-education-directory-2021.pdf).

**To apply for this programme, please complete and return this form to** [**wuth.learninganddevelopment@nhs.net**](mailto:wuth.learninganddevelopment@nhs.net) **no later than the application closing date for your preferred programme (see below for details).**

**Cohort Details**

There are four cohort dates currently available. Please indicate below which dates you would prefer to attend in order of preference (1=most preferred, 4=least preferred). If you are unavailable for a cohort, please indicate below.

All sessions will take place in the Training Room, 2nd Floor Elm House, Clatterbridge Hospital.

|  |  |  |  |
| --- | --- | --- | --- |
| **Cohort Number** | **Programme Dates** | **Application Dates** | **Preference** |
| 8 | Wednesday 3rd April 24  Thursday 4th April 24 | Applications close on 20th March  Application outcomes by 22nd March |  |
| 9 | Wednesday 12th June  Thursday 13th June | Applications close 29th May  Application outcomes by 31st May |  |
| 10 | Wednesday 7th August  Thursday 8th August | Applications close 24th July  Application outcomes by 26th July |  |
| 11 | Wednesday 2nd October  Thursday 3rd October | Applications close 18th September  Application outcomes by 20th September |  |

Please ensure that, other than for exceptional circumstances, you are able to commit to the programme dates and hold these in your diary until you hear the outcome of this application. You should only apply for cohorts where you are able to make both programme dates together.

**Application Form Section 1: Personal Details**

|  |  |
| --- | --- |
| **Title:** |  |
| **Name:** |  |
| **Division/Ward/Department:** |  |
| **Job Role:** |  |
| **Job Grade:** |  |
| **Staff Number:** |  |
| **Phone Number:** |  |
| **Email Address:** |  |
| **ESR Number:** |  |

**Section 2: Personal Statement**

1. **Please explain why you want to participate in the Leading Self programme** (you should reference your career aims: how participating in the programme will support you in the workplace, what you hope to gain etc.)

|  |
| --- |
| Max 500 words |

1. **In your own words, please tell us a bit about your role**

|  |
| --- |
| Max 200 words |

1. **Have you previously undertaken any leadership or management development? If so, please give details of the development and a brief overview of how you gained from it.**

|  |
| --- |
| Max 200 words |

1. **Are you currently on the WEPP programme? YES/NO**

**Section 3: Manager Supporting Statement**

1. **Please explain why you support this person’s application**

|  |
| --- |
| Max 100 words |

1. **How will you enable learning to be applied?**

|  |
| --- |
| Max 100 words |

1. **Upon completion of the programme, do you agree / commit to engaging in a reflective discussion with the participant about the learning that has been gained and how this will be applied in practice?** YES  NO
2. **Do you commit to releasing this person wherever possible to attend all scheduled programme dates and for two additional workshops should they be successfully allocated a place?** YES  NO

|  |  |  |  |
| --- | --- | --- | --- |
| **Manager Name/Signature** |  | **Date** |  |

**Section 4: Your Commitment**

By completing this application form you are agreeing to participate fully in all workshops and sessions of the relevant programme and all other sessions. This includes two full days of learning, and at least two workshops that you will choose depending on your development priorities identified through the programme.

I confirm that I will attend and participate in all required learning activities as set out above.

|  |  |  |  |
| --- | --- | --- | --- |
| **Applicant**  **Name/Signature** |  | **Date** |  |

**Next Steps**

* **Return your completed form to** [**wuth.learninganddevelopment@nhs.net**](mailto:wuth.learninganddevelopment@nhs.net) **and hold dates in your diary.**
* **If returning a hard copy application form, this can be posted through internal mail to the L&D Office, 2nd Floor Education Centre, Arrowe Park Hospital. Please ensure you leave enough time for your application to reach us before the relevant closing date.**
* **Application outcomes are based on your ability to complete the programme requirements and appropriate answers to the above questions.**
* **You will be informed of the outcome of your application no later than the dates stated on this application form.**

## Additional Information

We would like to know a bit more about you so that we can compare the experiences of different staff therefore we would be grateful if you could complete the details below.

1. **Gender:** Male  Female  Prefer to self-describe  Prefer not to say

**1a. Is this different from birth?** Yes  No

1. **Age at time of application­**
2. **What is your ethnic background?**

**White Asian / Asian British Chinese and other ethnic background**

British  Indian  Chinese

Irish  Pakistani  Any other ethnic background

Any other white  Bangladeshi  (please specify)

Background Any other Asian background

**Mixed Black / Black British**

White and Black Caribbean  Caribbean

White and Black African  African

White and Asian  Any other black background

Any other mixed background

1. **What is your sexual orientation?**

Heterosexual or straight  Gay man  Gay woman (lesbian)  Unsure

Bisexual  Other  I would prefer not to say

1. **What is your religion (if any)?**

No religion  Hindu  Sikh

Christian  Jewish  Any other religion (please specify)

Buddhist  Muslim

I would prefer not to say

1. **Do you have a disability or long-term health condition?** Yes  No

(By long-term, we mean that it has lasted, or is expecting to last, at least 12 months)

1. **Do you have a learning difficulty or are neurodivergent?** Yes  No

(For example, Autism, ADHD, Dyslexia, etc)

If you have answered ‘Yes’ to either question, and you require any reasonable adjustments or specific support on your learning programme, please contact email wuth.learninganddevelopment@nhs.net

1. **Are you a carer?**  Yes  No

**(**A person who cares, unpaid, for a friend or family member who, due to illness or disability, cannot cope without their support).

**NB: Please note this information will be treated in strict confidence and will only be used for monitoring purposes.**