

## **Mental Health Wellbeing Champion Application Form**

Please submit all applications by: Thursday 22<sup>nd</sup> February 2018

Name:			
Contact number:		Job title:	
Directorate:		Base:	
Email:		1	
Why are you interested in becoming a Mental Health Wellbeing Champion (MHWC)			
What skills and experiences can you bring to the role of a MHWC and how do you see yourself utilising these skills in this role			
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NAME of the latest the second	A A A A A A A A A A A A A A A A A A A		
What would success as a MHWC look like			
Mhat are your are ste	at atropatha and waskings		
What are your greatest strengths and weaknesses			



What is the biggest challenge you have faced and how did you handle it		
Give a specific example of a difficult decision you needed to make. How did you		
make that decision		
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Why do you think mental health awareness in the workplace is important		

Thank you for expressing interest in the Mental Health Wellbeing Champion.

Please submit all applications by **Thursday 22<sup>nd</sup> February** to <a href="mailto:jasmin.gill@nhsbt.nhs.uk">jasmin.gill@nhsbt.nhs.uk</a>

Should you be successful we will be contact you by email as soon as possible.