

## PHECC Committee Membership Application

PHECC seeks to appoint persons to assist in the work of the Council by participating on its various standing Committees. These include Education and Standards, Quality and Safety and Priority Dispatch.  
See link to Terms of Reference.

Please complete this application and include a short CV.

Which Committee are you applying for?

- Education and Standards ☐
- Quality and Safety ☐
- Priority Dispatch ☐

### Personal Details:

Title: \_\_\_\_\_

Surname: \_\_\_\_\_

Forename: \_\_\_\_\_

Home Address: \_\_\_\_\_

Work Address: \_\_\_\_\_

Telephone number(s): Home \_\_\_\_\_

Work \_\_\_\_\_

Mobile \_\_\_\_\_

Email: \_\_\_\_\_

Profession: \_\_\_\_\_

Pre-Hospital Emergency Care Council Registration Number/PIN (if applicable): \_\_\_\_\_

**Statements to support your application:**

- Detail why you want to be a member of the Committee and include any specific contribution you would bring to the Committee.
- Demonstrate your knowledge of pre-hospital emergency care in the Republic of Ireland as relevant and applicable to the Committee you are applying for.
- List the organisations/associations of which you are a member and provide evidence of experience in a patient advocacy or citizen representative/engagement/advocacy role.
- Provide some practical examples of situations or times when you effectively showed your ability to work as member of a team while engaging with a varying range of stakeholders.
- Can you commit to actively participate in the work of the Committee including preparation for meetings and attendance at all meetings?
- Is there any other information you would like to discuss or you feel should be considered when PHECC reviews your application?

**Declaration**

I confirm that:

- (i) The information that I have provided on this application has been honestly and accurately expressed to the best of my knowledge and belief.
- (ii) I do not know, or am not aware, of any conflict or potential conflict of interest, which would prevent my appointment as a participant on a PHECC Committee.

Name of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

Please note that all personal data shall be treated as confidential in accordance with the Data Protection Acts, 1988 and 2003.