**Higher Development Award – Expression of Interest Form**

The following application form should be completed by the delegate and counter-signed by their manager / HCA lead.

As part of the programme, we expect 100% commitment from learners including mandatory attendance at all workshops and completion of assignments within timeframes.

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| **Name** |  | **Organisation** |  |
| **Department** |  | **Band** |  |
| **Email (home or work)** |  | **Telephone** |  |
| **Role** |  | **Length of time in role** |  |

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| **As part of the programme, you will have the opportunity to study functional skills to level two. Please indicate if you have any functional skills qualifications:** | |
| **English** |  |
| **Maths** |  |
| **If you do not have qualifications, what have you done so far to develop your maths / English? For example, have you accessed local resources, ie National Numeracy?** | |
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| **Why do you want to attend the Higher Development Award? Has this been identified as part of your personal development? What do you plan to do with your learning?** |
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| **As part of the programme, you will be completing a Service Improvement Project (at level 3). What would be one thing you would like to improve in your area?** |
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| **Your Name and Signature** |  | **Date** |  |
| **Manager’s Name and Signature** |  | **Date** |  |
| **Manager’s Email** |  | **Manager’s Telephone** |  |
| **Lead Name and Signature** |  | **Date** |  |
| **Lead’s Email** |  | **Lead’s Telephone** |  |

Once completed please send to [dgonzalez@lambethcollege.ac.uk](mailto:dgonzalez@lambethcollege.ac.uk)