**Application to join the NHS Interim Management and Support NHS Pool**

Please Note: NHS Interim Management & Support (NHS IMAS) will consider every application to join the NHS Pool although not every applicant will be registered. If you have not heard from us within 28 days your application will not have been successful, and your information will not be stored by NHS IMAS.

By applying to be part of the NHS IMAS pool, you agree to the NHS IMAS team sharing the information on this form (which includes your CV and references) with other NHS organisations for consideration of potential assignments. You have the right to request that your details are removed from the NHS IMAS register at any point and withdraw your consent to share your information by contacting us at: [nhs.imas@nhs.net](mailto:nhs.imas@nhs.net). Further information can be found on the NHS England Privacy Notice: <https://www.england.nhs.uk/contact-us/privacy-notice/>

**By ticking this box, you confirm that you understand this requirement: ☐**

1. **Personal details**

|  |  |
| --- | --- |
| Full Name |  |
| Telephone Number |  |
| Email Address |  |
| Current Grade & Salary |  |
| Date Application Form Submitted |  |

**By ticking this box, you confirm you have the approval of your line manager to join the NHS IMAS Pool: ☐**

1. **Please tell us how you heard about NHS IMAS?**

Please select one option from the following:

|  |  |  |
| --- | --- | --- |
| Bulletin | **☐** | (Please specify) |
| NHS IMAS Pool Member | **☐** |  |
| NHS IMAS Staff Member | **☐** |  |
| NHS IMAS Website | **☐** |  |
| Previous Client | **☐** |  |
| Regional Talent Team | **☐** |  |
| Social Media (e.g., LinkedIn) | **☐** | (Please specify) |
| Workshop/Event | **☐** |  |
| Other | **☐** | (Please specify) |

1. **Relevant recent experience, knowledge and expertise**

Please provide up to three areas you specialise in and related examples of experience:

|  |  |
| --- | --- |
| Specialism | Experience |
|  |  |
|  |  |
|  |  |

1. **Working location preference**

|  |  |
| --- | --- |
| What is your catchment area for assignments? |  |
| Preference of working arrangement (i.e., On-site / Home-based / Hybrid) |  |

1. **Supporting references**

Please provide the details of three referees to support your NHS IMAS application. Your referees will need to include your current line manager and a further two referees should be at Director level, within Health and Social Care. At least two of these referees must be from within the NHS. All work undertaken within the past twelve months must be covered.

We will contact your referees directly in order to complete the registration process.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Referee Name | Job Title | Organisation | Email Address |
| 1. (Line Manager) |  |  |  |  |
| 2. |  |  |  |  |
| 3. |  |  |  |  |

NHS IMAS references may be shared with NHS IMAS clients during consideration of pool members for assignment opportunities. NHS IMAS references are intended to provide information on a pool member’s suitability to be considered for NHS IMAS assignments. They will not be supplied to employers for employment purposes.

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**Submitting your application**

Please Note: Being a pool member with NHS IMAS does not guarantee that you will be found work or that you will be placed on an assignment. Our service is demand led and we do not send out pool member CVs speculatively to the NHS.

* Please send your completed application to [nhs.imas@nhs.net](mailto:nhs.imas@nhs.net)
* And enclose a copy of your full and current CV in ‘Word’ format.