**Sleep Well Lived Experience Advisory Group Application Form**  
If you need a paper copy of the application form, or you need support to complete the application form, please get in touch with Rachel using the details at the end. Please fill in as much as you can; you can leave questions blank if you wish. We assess these applications based on many factors, including trying to get varied experiences within our group and also relevant experience for the project.

Name:

Address:

Email Address:

Contact Number:

Date of Birth:

Gender:

Ethnicity:

1. **Please tell us why you are interested in becoming a member of the Sleep Well Lived Experience Advisory Panel. For example *this can include things like why you think the research is important, what you would like to contribute to the research, etc***
2. **Please tell us if you have any sleep problems:**
3. **Please tell us a bit about any unusual experiences you may have dealt with. This can include things such as hearing voices and feeling very paranoid. You can read more about these experiences by clicking** [**here**](https://www.nhs.uk/conditions/psychosis/symptoms/)**:**
4. **Do you have any other information, experience or skills that you would like to share with us? Please note that this question is for our interest and will not affect the outcome of your application.**

**Please tell us how you heard about this opportunity:**

**☐** Please tick this box if you are happy for us to contact you again about this opportunity (note that if you do not tick this box, we will not have permission to contact you about whether or not you have been selected!)

**☐** Please tick this box if you would like to sign up to our **Young People’s Network**, where we will email you with more opportunities to be involved in mental health research. You will also be the first to hear about future opportunities at the Mcpin Foundation for Young People

**Most contact will be carried out by email. Please tell us your communication preferences below:**

☐ I am happy to communicate via email

☐ I am happy to communicate via telephone/mobile phone

**How would you be travelling to London for meetings?**

☐ I would travel to London with an adult

☐ I am over the age of 16 and I would be happy to travel without an adult

**What happens next?**

The deadline for applications is 5pm on November 14th 2019 Successful applicants will be notified before the end of the year. Note that the selection process will not be based entirely on the quality of applications. We will be selecting based on a range of experiences, so that we can increase the range of experiences and backgrounds in the group. Please send completed application forms to: Please send completed application forms to: For paper copies, please send to: **The McPin Foundation, 7-14 Great Dover Street London SE1 4YR.**

We will be likely holding our first meeting in late 2019. We will ask members for their availability before confirming a date. Members are welcome to travel and/or attend meetings with an adult if they would prefer.

Please note that for successful applicants under the age of 18, we will need to ask your parent or guardian for consent prior to you joining the group.

**Need more information?** Please contact:

**Rachel Temple at** [**racheltemple@mcpin.org**](mailto:racheltemple@mcpin.org) **or telephone 020 7922 7877**

The information you give us will be kept confidential and stored securely at the McPin Foundation offices in accordance with the Data Protection Act. We will only use your details to contact you about the Young People’s Advisory Group unless you actively consent to receive other news and information relating to the McPin Foundation.