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| **Note to BMFMS Office Staff: Please remove this box before review** |
| **Working Group applied for:** |  |
| **Working Group Role applied for:** |  |
| **Name:** |  |
| **Hospital:** |  |
| **(Office use) Applicant ID:** |  |

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| --- |
| **Job Title:** |

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| **Where do you work?** |
| East Midlands |  | East of England |  |
| North West |  | London |  |
| North East |  | Northern Ireland |  |
| Scotland |  | South East |  |
| South West |  | Wales |  |
| West Midlands |  | Yorkshire and Humber |  |
| Outside of UK |  |  |  |

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| **How many births does your unit have per annum?** |
| >5000 |  | >5000 |  | <3000 |  |

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| **How many times have you applied to be on BMFMS working groups before?** |
| Successful applications |  | Unsuccessful applications |  |

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| **Please provide a statement about your interest in joining the working group. Please include details of any relevant experience or expertise.****If applying for a chair’s role - max 500 words****All other working group roles – max 250 words** |

**Please return to** bmfms@rcog.org.uk  **by the relevant deadline.**