Please complete and return to Deborah James, deboraha.james@nhs.net before May 19th

I would like to apply to undertake training to become a non-medical prescriber at

………………………………University Provider, starting in ……………………………2020.

I do/ do not need to pass clinical assessment module at the same time

I have been working in my current work environment for ………………..years

My highest academic qualification is …………………………..gained in ………………………………….

I am a GPN / Pharmacist /Social Care Nurse – please delete those that do not apply.

I understand that my application will be reviewed against criteria if there are more

applicants than places available.

I understand that my proposed mentor and employer must approve this application in order for it to be taken forward to the panel 

The name and job title of my prosed mentor is\*;

………………………………………………………………………………………………………………………………………………

Their contact details are; ……………………………………………………………………………………………………………….

My proposed area of prescribing is

………………………………………………………………………………………………..

**Very Brief Impact Statement, max 150 words**

please describe the difference that becoming a non-medical prescriber will make for patients in practice and /or at the PCN level

\*We will contact your proposed mentor to confirm that they are willing and able to provide the necessary support for learning so please make sure we have their preferred contact details and that you have discussed with them the requirements with them of the course you would like to follow.