***Expression of interest template – TAPPS Cohort 3***

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| --- | --- |
| **Organisation name:** |  |
| **Employing organisation (if different to above):** |  |
| **Where will the TAPP(s) be based:** |  |
| **Lead point of contact for recruitment/ engagement purposes:** |  |
| **Number of posts you wish to appoint:** |  |
| **Clinical/ Service area: (Include a brief outline of the proposed role)** |  |
| **Clinical Supervision arrangements:** |  |
| **Line management arrangements:** |  |
| **Confirmation that salary costs are covered for the Band 4 training position (TAPP) and a Band 5 (APP) role is available post qualification** |  |
| **Do you have any key questions, or areas of concern you would like support from the project team with?** |  |

Please return completed expressions of interest to [dnixon694@btinternet.com](mailto:dnixon694@btinternet.com) and [Miranda.budd@lscft.nhs.uk](mailto:Miranda.budd@lscft.nhs.uk) by no later than Friday 21st October 2022.