

**All sections to be completed in full**

|  |
| --- |
| APPLICATION FORMICPOP Case Manager / Clinical Nurse Manager 2 (ICPOP)HSE Mid WestCampaign Reference: MWCH 25.009 |

Please carefully note the following instructions:

# Please read the Job Specification and Additional Campaign Information document which provides useful information about the requirements of this role.

# Please ensure you read the instructions for the completion of this online application form in full and complete all areas, including the competency questions section. Failure to complete all areas of the application form may result in you not being brought forward to the interview stage of the selection process.

# Applicants wishing to complete and submit an application should do so by the closing time of 19th March 2025 @ midnight*.* Applications *will not* be accepted after this date and time, no exceptions will be made.

* You must upload your completed application form to Rezoomo no later than **19th March 2025 @ midnight*.*** Rezoomo link:

<https://www.rezoomo.com/company/community-healthcare-mid-west/jobs/>

* Please do not exceed the **500 word limit** when answering each of your competency based questions.
* The Health Service Executive will run this campaign in compliance with the Code of Practice prepared by the Commission for Public Service Appointments (CPSA). The Codes of Practice are available on the CPSA website [www.cpsa.ie](http://www.cpsa.ie)
* The Health Service Executive is an Equal Opportunities Employer.
* The Health Service Executive recognises its responsibilities under the Data Protection Acts 2003 & 1988 and the Freedom of Information Act 2014.

|  |  |
| --- | --- |
| **Closing Date & Time** | **19th March 2025 @ midnight.** |
| **Link to Rezoomo** | <https://www.rezoomo.com/company/community-healthcare-mid-west/jobs/> |
| **Anticipated interview dates** | **You may be called to interview at short notice.** |

Applicant Details

|  |  |
| --- | --- |
| Position Applied for: | **Case Manager / Clinical Nurse Manager 2 (ICPOP)** |
| Campaign Reference: | **MWCH 25.009** |
|  |  |  |  |
| **Personal Details:** |  |  |  |
| First Name: |  |
|  |  |  |  |
| Last Name: |  |
|  |  |  |  |
| Postal address for correspondence: |  |
|  |
|  |

|  |  |
| --- | --- |
| Mobile Telephone (mandatory): |  |
|  |  |  |  |
| Contact Tel No. 2: |  |
| E-mail Address (mandatory):  *(You may provide more than one)* |  |
|  | |

|  |  |
| --- | --- |
| Drivers Licence *(please state type & category):* |  |

**European Economic Area**

Are you an EEA (European Economic Area) National? Yes  / No

Please see Appendix 2 of the ‘Additional Campaign Information’ document for the definition of an EEA National.

**NB If you are a non-EEA citizen you must provide the requested documentation to support your application**. For further information you must read ‘Appendix 2’ in the ‘Additional Campaign Information’ document.

1. **Superannuation Schemes**

Are you currently in receipt of a Voluntary Early Retirement or Ill Health Early Retirement Pension from any of the Public Health Superannuation Schemes listed at 1-5 below, or any other Public Sector Pension Scheme?

|  |  |  |
| --- | --- | --- |
| **Are you currently in receipt of a pension from any of the following superannuation schemes? (This means have you retired?)** | | |
|  | **YES** | **NO** |
| 1. Local Government Superannuation Scheme (LGSS) |  |  |
| 1. Health Service Executive Employee Superannuation Scheme |  |  |
| 1. Voluntary Hospitals Superannuation Scheme (VHSS) |  |  |
| 1. Nominated Health Agencies Superannuation Scheme (NHASS) |  |  |
| 1. Other Public Service Superannuation Scheme |  |  |

If you have answered ‘yes’ in relation to being in receipt of a pension from any of the above Superannuation Schemes you are not eligible to apply for this recruitment campaign. Please read Appendix 4 in the ‘Additional Campaign Information’ for further details.

1. **Current Contractual Status**

* **I am currently a HSE employee\* Yes**  **No**
* **I am currently a Tusla employee\* Yes**  **No**

**Please tick the HSE/Tusla Area in which you work**

|  |  |  |  |
| --- | --- | --- | --- |
| HSE Dublin and Midlands |  | HSE Dublin and North East |  |
| HSE Dublin and South East |  | HSE Mid West |  |
| HSE West and North West |  | HSE South West |  |

If you answered yes to the above question, please choose the option below which best matches your current contractual status:

* **I have a permanent contract**

**Or**

* **I have a temporary contract**

\*HSE / Tusla Employee = you are a direct employee of the HSE or Tusla and not in a post funded or partially funded by the HSE or Tusla.

1. **Proficiency in Irish**

Candidates will be afforded the added opportunity to demonstrate their ability to perform the duties of the office through Irish. This assessment will be on a pass/fail basis and will not disturb the marks awarded in the selection process. Where vacancies arise for which proficiency in Irish is a management requirement, the HSE will offer such posts in order of merit to candidates who have successfully passed the Irish assessment. Please indicate if you wish to undertake an Irish assessment exam.

Yes  / No

**QUALIFICATIONS & ELIGIBILITY CRITERIA**

**Please indicate below if you are registered in the General Division of the Register of Nurses maintained by Bord Altranais agus Cnáimhseachais na hÉireann (the Nursing and Midwifery Board of Ireland) or entitled to be so registered.**

|  |  |  |
| --- | --- | --- |
| **Registration** | **Please answer ‘Yes’ or ‘No’ as appropriate**  **to your current**  **Registration status** | **Pin Number** |
| I am a fully qualified Nurse with active An Bord Altranais agus Cnáimhseachais na hÉireann (Nursing and Midwifery Board of Ireland) registration. |  |  |
| I am a fully qualified Nurse registered with a European Authority other than An Bord Altranais agus Cnáimhseachais na hÉireann (the Nursing and Midwifery Board of Ireland). |  |  |
| I am a fully qualified Nurse registered with a non-European Authority. |  |  |
| The date my name was entered on the register for the Division(s) is:  Please enter as DD/MM/YYYY |  | |

Seeking registration with Bord Altranais agus Cnáimhseachais na hÉireann (the Nursing and Midwifery Board of Ireland) is the responsibility of the applicant. *Please read Appendix 1 of the ‘Additional Campaign Information’ for more information on registration.*

**And**

1. **Please indicate your 5 years’ post registration experience (or an aggregate of 5 years’ full time post registration experience) of which 2 years must be in the speciality of Gerontology / Older Persons Service.**

**Please note that you must have achieved the 5 years’ (60 months) experience no later than the closing date of this campaign. Please detail below (in months) your experience to date that demonstrates your fulfilling of the above eligibility criteria. Please note that the information supplied here will be used to determine your eligibility for this campaign. If you work in a part-time capacity please list your monthly hours and total months of work as they are. Please do not make whole time equivalent calculations.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **From Date (00/00/00)** | **To Date**  **(00/00/00)** | **Average Monthly Hours** | **Total Months** | **Employer** | **Title of Post** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| **Total Cumulative Months** |  |  |  |  |  |

1. If it is not clearly evident from the title of your post that it satisfies the eligibility criterion for**Case Manager / Clinical Nurse Manager 2** please provide further detail in the box below**:**

|  |
| --- |
|  |

**And**

**CONTINUING PROFESSIONAL DEVELOPMENT**

**Please provide details below of your continuing professional development at the appropriate level:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Date Completed**  **From/To**  **MM/YY** | **Educational Institution**  **(if applicable)** | **Name of Course/Training etc.** | **Course/Training Duration** | **Qualification Achieved**  **(if applicable)** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**ADDITIONAL EDUCATIONAL ACHIEVEMENTS**

**Please include second level and any (additional) third level educational achievements:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Dates**  **From/To** | **Educational Institution** | **Conferring**  **Body** | **Course of Study** | **Qualification Achieved** | **Grades Achieved** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

**CAREER OVERVIEW**

**IMPORTANT: Please ensure that all career history is clearly outlined below (e.g. if you took a career break, spent time out of work, please include this information so there are no gaps in your career history from when you left full-time education to present date).**

|  |  |  |  |
| --- | --- | --- | --- |
| **From** | **To** | **Title** | **Employer** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Detailed Career History - please begin by listing the most recent first:**

|  |  |
| --- | --- |
| **Job Title:**  **Grade / Management Level *(if applicable):*** | |
| **Employer(s) & Department Name:** | |
| **From (00/00):** | **To (00/00):** |
| **Main Roles & Responsibilities:** | |

|  |  |
| --- | --- |
| **Job Title:**  **Grade / Management Level *(if applicable):*** | |
| **Employer(s) & Department Name:** | |
| **From (00/00):** | **To (00/00):** |
| **Main Roles & Responsibilities:** | |

|  |  |
| --- | --- |
| **Job Title:**  **Grade / Management Level *(if applicable):*** | |
| **Employer(s) & Department Name:** | |
| **From (00/00):** | **To (00/00):** |
| **Main Roles & Responsibilities:** | |

|  |  |
| --- | --- |
| **Job Title:**  **Grade / Management Level *(if applicable):*** | |
| **Employer(s) & Department Name:** | |
| **From (00/00):** | **To (00/00):** |
| **Main Roles & Responsibilities:** | |

|  |  |
| --- | --- |
| **Job Title:**  **Grade / Management Level *(if applicable):*** | |
| **Employer(s) & Department Name:** | |
| **From (00/00):** | **To (00/00):** |
| **Main Roles & Responsibilities:** | |

### Competency Questions 1 – 4 and outline of experience relevant to the role Question 5

**In this area we ask you to focus on your experience to date that is relevant to the role of Case Manager / Clinical Nurse Manager 2. Please indicate below how your professional experience meets the eligibility criteria for this post. This section will be assessed by Senior Management to consider your experience as it is relevant to the eligibility criteria. Information you provide in this section and in other areas of the application form may be used as part of a shortlisting exercise and may be discussed in more depth at interview, should you be called to one.**

* **Please provide clear, detailed answer(s) that demonstrate the depth and breadth of your experience in the area(s) below, reflective of the requirements of this post.**
* **Each section below must be completed. As you complete each section we recognise that there will be an overlap in the employer and date periods.**
* **We would like to highlight to you that if you omit information in this section pertinent to the eligibility criteria, your application will be deemed ineligible and you will subsequently not be called forward to interview.**

|  |
| --- |
| **1. Planning, Organisation & Management Skills**  It is important for the Case Manager / Clinical Nurse Manager 2 to be able to plan, organize and manage resources efficiently and effectively within a specified timeframe. S/he must demonstrate the ability to manage deadlines and effectively handle multiple tasks. S/he must be able to demonstrate flexibility and adaptability in their approach to work. S/he must demonstrate the ability to pre-empt potential problems or competing priorities and react constructively to setbacks.    *In the space below, please give an example of a situation where you best demonstrated your ability in this area****.***  ***Please limit your response to 500 words.*** |
|  |

|  |
| --- |
| **2. Building & Maintaining Relationships including the ability to work independently and as part of a team**  The effective Case Manager / Clinical Nurse Manager 2 will demonstrate the ability to work on their own initiative as well as part of a team. S/he must adopt a collaborative approach to patient care by co-ordination of care/interventions and interdisciplinary team working. S/he must demonstrate strong interpersonal skills including the ability to build and maintain relationships as well as foster good professional working relationships between colleagues. S/he must demonstrate the ability to lead on clinical practice.  *In the space below, please give an example of a situation where you best demonstrated your ability in this area.*  ***Please limit your response to 500 words.*** |
|  |

|  |
| --- |
| **3. Commitment to Providing a Quality Service**  The effective Case Manager / Clinical Nurse Manager 2 will demonstrate a strong commitment to the delivery of a quality service. S/he must display awareness and appreciation of the service user and the ability to empathise with and treat others with dignity and respect. S/he must demonstrate motivation, initiative and an innovative approach to job and service developments, as well as flexibility and openness to change. S/he must demonstrate integrity and an ethical stance at all times.  *In the space below, please give an example of a situation where you best demonstrated your ability in this area.*  ***Please limit your response to 500 words.*** |
|  |

|  |
| --- |
| **4. Analysing, Evaluating and Decision Making**  It is important for the Case Manager / Clinical Nurse Manager 2 to be able to demonstrate evidence-based decision-making, using sound analytical and problem-solving ability as well as professional judgement. S/he must be able to take an overview of complex problems and anticipate implications/consequences of different solutions. S/he must know how to access relevant information to address issues as well as demonstrating resilience and composure in dealing with situations.  *In the space below, please give an example of a situation where you best demonstrated your ability in this area****.***  ***Please limit your response to 500 words.*** |
|  |

|  |  |
| --- | --- |
| **5. Knowledge/ Experience Relevant To The Role : Case Manager / Clinical Nurse Manager 2**  Please provide below specific details from your experience to date that you feel may help you meet the requirements for this post as detailed in the Job Specification. Please note that the information supplied here will be taken into consideration in determining your eligibility and / or shortlisting / ranking for this campaign.  *Please include dates, the name of your employer & department where you worked and details as to how you meet the requirements specified in the eligibility and ‘post specific requirements’ section of the Job Specification.* | |
| **Date(s) from – Date(s) to** | **Employer(s) & Department Name** |
|  |  |
| Demonstrate depth and breadth of experience in the area of **gerontological** nursing as relevant to the role **of Case Manager / Clinical Nurse Manager 2** | |

**Disability**

Do you consider yourself to have a disability that might require special accommodation(s) to enable you to participate to the best of your ability in the selection process? **Yes**  / **No**

**General Declaration**

It is important that you read this Declaration carefully and then sign it in the space below.

**Part 1:** Obligations Placed on Candidates who participate in The Recruitment Process.

The Public Service Management (Recruitment and Appointments) Act 2004 makes very specific provisions in relation to the responsibilities placed on candidates who participate in recruitment campaigns and these are detailed in Section 4 of the Code of Practice issued under the Act.

These obligations are as follows:

Any canvassing by or on behalf of candidates shall result in disqualification and exclusion from the recruitment process. Candidates shall not:

* knowingly or recklessly make a false or a misleading application
* knowingly or recklessly provide false information or documentation
* canvass any person with or without inducements
* impersonate a candidate at any stage of the process
* knowingly or maliciously obstruct or interfere with the recruitment process
* knowingly and without lawful authority take any action that could result in the compromising of any test material or of any evaluation of it
* interfere with or compromise the process in any way.

Any person who contravenes the above provisions, or who assists another person in contravening the above provisions, shall be guilty of an offence.

It is the policy of the HSE to report any such above contraventions to An Garda Siochana.

In addition, where a person found guilty of an offence was or is a candidate at a recruitment / selection process, then, in accordance with the Public Service Management (Recruitment and Appointments) Act 2004:

* where he/she has not been appointed to a post, he/she shall be disqualified as a candidate; and
* where he/she has been appointed as a result of that process, he/she shall forfeit that appointment.

**Part 2**

**Declaration:** “I declare that to the best of my knowledge and belief there is nothing in relation to my conduct, character or personal background of any nature that would adversely affect the position of trust in which I would be placed by virtue of my appointment to this position. I hereby confirm my irrevocable consent to the Health Service Executive to the making of such enquiries, as the Health Service Executive deems necessary in respect of my suitability for the post in respect of which this application is made.

I hereby accept and confirm the entitlement of the Health Service Executive to reject my application or terminate my employment (in the event of a contract of employment having been entered into) if I have omitted to furnish the Health Service Executive with any information relevant to my application or to my continued employment with the Health Service Executive or where I have made any false statement or misrepresentation relevant to this application or my continuing employment with the Health Service Executive.

Furthermore, I hereby declare that all the particulars furnished in connection with this application are true, and that I am aware of the qualifications and particulars for this position. I understand that I may be required to submit documentary evidence in support of any particulars given by me on my Application Form. I understand that any false or misleading information submitted by me will render me liable to automatic disqualification or render me liable to dismissal, if employed.”

Failure to sign application will render it invalid[[1]](#footnote-1).

**Signed:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Name of Applicant)*

NB: If you are submitting your application form via email we will accept the application form unsigned but you will be required to sign the Declaration at interview should you be invited to one. Failure to sign this declaration at interview will render it invalid.

### REFERENCES

Please give details of three referees (including your current employer). Please ensure that the referee details you provide are from a professional perspective. We retain the right to contact all previous employers.

Do you wish us to contact you prior to contacting your referees? Yes  / No

**1. Name and Job Title of Referee:**

**Dates From To (MM/YY- MM/YY):**

**Professional Relationship to Candidate:**

**Postal Address:**

**Telephone Contact Details:** Mobile: Landline:

**Email Address:**

**2. Name and Job Title of Referee:**

**Dates From To (MM/YY- MM/YY):**

**Professional Relationship to Candidate:**

**Postal Address:**

**Telephone Contact Details:** Mobile: Landline:

**Email Address:**

**3. Name and Job Title of Referee:**

**Dates From To (MM/YY- MM/YY):**

**Professional Relationship to Candidate:**

**Postal Address:**

**Telephone Contact Details:** Mobile: Landline:

**Email Address:**

**Applicant Checklist - Important**

We recommend that you check your application form carefully to ensure that you have included / clearly illustrated / answered:

|  |  |  |  |
| --- | --- | --- | --- |
| 1 | Mobile Telephone Number  Email Address  Postal Address |  | **Mandatory** |
| 2 | That the information you have provided with regard to eligibility shows clear dates e.g. DD/MM/YY, education courses, job titles, college names, qualification titles |  |
| 3 | Competency Questions 1 – 4 and experience relevant to the role (Question 5)  Each question must be fully completed to ensure eligibility to progress in this campaign.  500 word limit (where applicable) must not be exceeded. |  |
| 4 | Work Permit Documentation (if relevant to non-EU applicants) Please refer to Appendix 2 of the Additional Campaign Information document for details of documentation required. |  |
| 6 | That you have downloaded the Job Specification and Additional Campaign Information for future reference. | | |

**If all required details / documentation (as above) are not submitted with your application we will be unable to process your application to the next stage of the process i.e. shortlisting / interview.**

# Appendix 1

**COMPETENCY QUESTIONS GUIDE**

**Information on completing the Competency Questions:**

In the competency questions section, you are required to describe some of your personal achievements to date that demonstrate certain necessary skills and qualities required for the position of Case Manager / Clinical Nurse Manager 2 - Older Persons Services. The skills and qualities are outlined in the Question Areas 1 – 4. Question 5 refers to experience relevant to the role.

All question areas must be completed and remember that you will be questioned on all areas at interview**.** The instructions below will help you to complete your answers, but you should also consider these instructions when you are preparing for interview.

For each Question Area 1-4, you are given a description of a skill or quality. You are then asked to describe a situation, from your own experience, which you think is the best example of what **YOU** have done which demonstrates this skill or quality. It is essential that you describe how **you** demonstrated the skill or quality in question.

The information you present here may form part of a ranking exercise process, and may also be used to help structure your interview, if you are invited to one. A ranking exercise may apply based on the information you provide in your application form. This means that a ranking board will ‘rank’ applicants based on information put forward in the competency questions section of your application form. Interviews may be held on a phased basis, inviting applicants to interview based on the position held in the ranking exercise. A primary panel will be formed of candidates successful in the first phase of interviews. If subsequent interviews are held candidates successful at these interviews will be added to the end of the primary panel and will be listed with a lower order of merit.

Therefore, compose your replies carefully in this section and try to structure what you write so that you give specific information about what youhave done - for example, do not simply say that “X was successful”, describe exactly whatyou did and how you demonstrated the skill or quality in question.

**Do not exceed the word limit, where applicable.** One of the key skills required of the Case Manager / Clinical Nurse Manager 2 – Older Persons Services is the ability to **write clearly and concisely and your written communication skills will be assessed against what you write on your application form**.

For each example please include the following:

**(a)** **the nature of the task, problem or objective;**

**(b) what you actually did and how you demonstrated the skill or quality (and, where appropriate, the date you demonstrated it);**

**(c) the outcome or result of the situation and your estimate of the proportion of credit you can claim for the outcome.**

Please do not use the same example to illustrate your answer to more than two skill areas.

Please note that, should you be called to interview, the board may look for **additional examples** of where you demonstrated the skills required for this post so you should think of a number of examples of where you demonstrated each of the skills.

Note:

* It is recommended that you keep a copy of this section of the application form.

# Guidelines for Completing the Competency Questions

Competency Questions are designed to help you to present **relevant evidence** in order that decision makers can evaluate how well you ‘fit’ the requirements of a particular role. Relevant evidence is usually drawn from your work experience and the way in which you have accomplished a range of activities. Those involved in screening the applications will be evaluating the information you give against **specific skills** required for effective performance in the role. To do this they need you to give enough detail so that they can tell **what you actually did** and **how you did it.**

The people doing the screening **will not** assume that you demonstrate a skill at the right level just because of your current role, length of experience or educational qualifications. These do not give enough evidence about how you accomplished relevant tasks.

So, if a question is about your approach to decision making, you need to do more than describe your current role and list important decisions you have made. You will need to describe **how** you reached relevant decisions.

Some guidelines for presenting yourself well are given below:-

* **Give specific examples** – most questions will ask you to describe an example of when you have demonstrated a skill: try to do this concisely but with enough detail so that the reader will be clear about **what you actually did**.This detail might include information about timescales, the number of people involved, budgets etc. It can help to use bullet points so that the sequence of events is clear to the reader.
* **Give a range of examples** – if possible, base your answers on different situations or challenges you faced rather than rely on just one experience. This helps the reader to evaluate how you tackle different challenges and not just your behaviour in a ‘one off’ situation.
* **Be concrete rather than theoretical** – a clear description of **how you actually behaved** in a particular situation (and why) is of much more use to the reader than a vague or general description of what you consider to be desirable attributes.

# Examples on how to complete this section of the application form:

**Skill Area: Communication Skills:** *able to adapt your communication style to particular situations and audiences….. able to produce clear and concise written information….*

***Example 1:*** *I was responsible for producing important management reports and supporting presentations for a range of important and high profile clients. Through my understanding of the clients’ needs and my effective communication skills, I have ensured that the reports that go to the clients are relevant and focused, and are continually improved. The reports I have produced and the presentations I have made were well received by all my clients. As a result of the combination of my analytical thinking and interpersonal and communication skills, my brief has been extended to lead the development of the strategic plan for the organisation.*

***Example 2:*** *(a) The unit I was attached to was responsible for producing a management report and supporting oral presentation for several large clients, some with significant problems and issues to report. In some cases the management report was publicly available and was subject to a great deal of scrutiny. A new style/format of management letter needed to be developed for my clients, as many of the clients were complaining that the letters were too large/long and difficult to read.*

*(b) I was tasked with developing a new style of management letter for the clients. I had to meet stringent quality requirements/criteria whilst addressing the need to reduce its size. Following consultation, mainly over the phone and face-to-face, with the majority of our clients, I realised that a summarised report format with a better visual and more interactive presentation was the answer. I developed a format for a summarised report, reducing the average length from 40 pages to just 10. I achieved this through careful editing of information and increased use of graphs etc. I then developed a more focused presentation to clients and included more graphical displays and incorporated short presentations by colleagues directly involved in producing the work. During the presentations I encouraged clients to ask questions and develop their understanding of the issues at hand.*

*(c) The summarised management report and improved presentations were seen as a success by the clients who, without exception, in responding to an evaluation survey, found the new format/style better than the previous, and all requested that the revised system should be continued. 80% credit*

**Example 1 (above):**

This is **not** a good example because it:

* does not give sufficient details of exactly what the person did or how they actually demonstrated their *“ effective communications skills”*
* also, it is not clear where the information requested at (a), (b) and (c) is presented.

**Example 2 (above):**

This is a **better** example because it:

* describes exactly what the person did and how they communicated, for example

***“…..consultation, mainly over the phone and face-to-face” & “developed a format for a summarised report, reducing the average length from 40 pages to just 10” “achieved this through careful editing of the information and increased use of graphs”, “encouraged clients to ask questions”***

* also, it is clearer where the information requested at (a), (b) and (c) is presented.

**Reminder:**

**Once you have completed Question Areas 1-4, you should progress to Question Area 5 - an Experience Question. Please note that all areas must be completed at the time of application.**

1. [↑](#footnote-ref-1)