**Staff development fund application**

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| --- | --- |
| **Name** |  |
| **Email** |  |
| **Organisation** |  |
| **Role** |  |
| **Proposed activity** |  |
| **Date of this proposed activity** |  |
| **Cost of activity** |  |
| **Line manager has approved application. Supporting statement included.** |  |
| **Brief outline of how this will support your development to enable you to support the King’s Health Partners’ five year strategy and beyond and how you will share the learning from the staff development opportunity with your team.** | |

Please send completed form to [educationacademy@kcl.ac.uk](mailto:Juliet.barnett@slam.nhs.uk)