

Cardiff and Vale Regional Partnership Board Unpaid Carer (Adult) Representative Expression of Interest

NAME

ADDRESS	
-	
TEL _	Email
the Role Profi Please answe	you to describe your skills and experiences below. Please refer to le and/or other supporting membership documentation provided. er all questions. Please return completed application forms to Ball@wales.nhs.uk by 31st October 2025.
experience of their role on t	g for people who are able to draw on their own current being an unpaid carer in Cardiff and the Vale, which will help he Cardiff and Vale Regional Partnership Board. In that you are an unpaid carer living in Cardiff or the Vale of
Glamorgan.	that you are an unpaid carer living in Cardin or the vale of
•	some of your experience in your caring role and how you would relate
	g for people who understand the practical support needs of
	in Cardiff and the Vale. your understanding of some of the main practical support needs of
	in Cardiff and the Vale.
	g for people who will be able to provide a representative view of aid carer and who have a breadth of knowledge of unpaid carers the Vale.

Please outline how you might provide a representative view of the needs of a wide range of unpaid carers in this role?				
We are looking for people who are able to gain the views of other unpaid carers through access to carer support groups, forums and networks etc, and are able to take their views forward and provide feedback to unpaid carers. Please outline how you would be able to do this.				
_	e a member of a local or na munity Health Council, etc	ational organisation such as a		
onanty, local group, com	manity Hould Godnon, oto	,		
We are looking for people who have involvement and influencing skills. Please describe what you have done in this area. Who were you trying to influence and/or involve and why? How did you use these skills? What was the outcome?				
,	,			
Nominations				
Please provide the name recommend you for this r		people who would be willing to		
Name:	Contact Details	Context in which they work		
		with the applicant		

Data Sharing Agreement for sharing data to support recruitment

This form is to confirm that you consent for **Glamorgan Voluntary Services** sharing this Expression of interest and associated references with **members of the Cardiff**

and Vale Regional Partnership Board and support team (RPB) for the purposes of recruitment linked to the Unpaid Carers Representative role.

We will share the information you share in this Expression of Interest and references with members involved in recruiting this role.

We want to share this data to ensure we can involve members of the RPB with recruitment as partners will be included in the selection process and interview panel.

If you would like to withdraw your consent please email **christopher.ball@wales.nhs.uk**

Please confirm if you consent for us sharing the information in this way.

Yes – I consent to **Glamorgan Voluntary Services** sharing this Expression of interest and associated references with **members of the Cardiff and Vale Regional Partnership Board and support team (RPB)** for the purposes of recruitment linked to the Unpaid Carers Representative role.

No – **Glamorgan Voluntary Services** sharing this Expression of interest and associated references with **members of the Cardiff and Vale Regional Partnership Board and support team (RPB)** for the purposes of recruitment linked to the Unpaid Carers Representative role.

to the Unpaid Carers Representative role.	
Name:	
Date:	