

Nominator Form for Line Manager

Please complete the Nominator Form below as part of your chosen programme's application process.

Fields marked with an * are required

IMPORTANT INFORMATION

This part of the application process is to be completed by the applicant's line manager and requires an electronic signature from the Chief Nurse of the applicant's employing organisation.

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|---|--|
| Programme: * | |
| First Name: * | |
| Last Name: * | |
| Email: * | |
| Email Confirmation: * | |
| Job Title: * | |
| Department: * | |
| Organisation: * | |
| Relationship to applicant: * | |
| Name of applicant: * | |
| Date: * | |
| At this point in their leadership journey, why do you think this programme is relevant for this person? * | |
| What do you see as this individual's leadership potential over the next five years and when might you expect them to take up more strategic responsibilities? * | |
| I hereby agree that the applicant will be fully supported to attend the programme events and given adequate time off in order to complete the programme to his/her fullest ability. | |
| Name: * | |
| Signature: * | |
| Position: * | |
| Please provide an email for the Chief Nurse of your organisation * | |

The Florence Nightingale Foundation will hold your details to process your employee's application and to keep you up to date on what's happening at the Foundation. If you prefer not to hear from us you can unsubscribe from all further communications at any time by telephone on 020 7730 3030 or by emailing admin@florence-nightingale-foundation.org.uk