**Ulster University Health, Safety and Wellbeing Champion Network**

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| **Employee Name** |  |
| **Staff Number** |  |
| **Job Title** |  |
| **Campus** |  |
| **Faculty/School/Dept** |  |
| **Full Time/Part Time/Hybrid** |  |
| **Contact email/phone number** |  |

**Please indicate which Health Safety and Wellbeing Champion role/s you will be undertaking on behalf of your department.**

Mental Health First Aider

Wellbeing Champion

Local Display Screen Equipment (LDSE) Assessor

Health and Safety Co-ordinator

Fire Marshals

\*Those interested in First Aid should apply through Appendix 1, application for training on the Ulster University Health, Safety and Wellbeing First Aid Procedure [First Aid Provision (ulster.ac.uk)](https://www.ulster.ac.uk/__data/assets/pdf_file/0011/863444/First-Aid-Provision.pdf)\*

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| Have you ever been trained in any of the above champion roles in the past? If so, please give details. |
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| When trained, which areas/blocks/departments will you undertake this role in? |
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| For LDSE Assessors - Have you undertaken the Ulster University online DSE course and completed your own assessment? Dates of own assessment. |
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Employee signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Manager’s approval for the training requested.**

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| Relevant to the role under request, are there any other champions undertaking this role within your department, and if so, please provide justification for this role prior to training request.  **\*Management need to ensure that they have assessed their need for this champion prior to submitting this form to the HSW team. Due to high numbers of previous applications, a cap has been introduced which may impact further approval.** |
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Manager’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please submit the form to Health, Safety and Wellbeing email: [healthandsafety@ulster.ac.uk](mailto:healthandsafety@ulster.ac.uk)