**Expression of Interest**

By completing the attached Expression of Interest form, you commit to:

* Your own professional development by undertaking relevant multiagency safeguarding adult training **prior** to attending train the trainer workshop.
* Attend at least one trained trainer network meeting a year.
* Deliver at least one safeguarding adult training session a year and informing SAB Learning and Development subgroup of any training you deliver.

|  |  |
| --- | --- |
| Name |  |
| Job Title |  |
| Organisation |  |
| Telephone Number |  |
| Email |  |

|  |  |
| --- | --- |
| Does your organisation deliver support to people living in South Glos local authority | Yes  No |
| Do you currently deliver Safeguarding Adult Training | Yes  No |
| Date attended/ booked on Raising Safeguarding Concerns Training or equivalent (please state) |  |
| Date attended/ booked on Effective Multi Agency Working Training or equivalent (please state) |  |

|  |
| --- |
| List any other relevant Safeguarding Adult training you have attended in last 2 years including date and training provider. |

|  |
| --- |
| Please describe your current role and any experience, skills, qualifications you have in delivering training to staff: |

|  |
| --- |
| What you hope to gain from being a trained trainer: |

|  |
| --- |
| What you and your organisation hope to gain from being a member of the network: |

|  |
| --- |
| I am aware that by joining the network I will be required to:   * Attend Day 1&2 of workshop, complete all training and review visit to become a Trained Trainer and network member * Deliver safeguarding training within your organisation at least once per year * Send feedback and data on what training you have delivered within your organisation to SGC * Attend the Trained Trainer network meetings at least once per year   **YOUR SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

|  |
| --- |
| For SGC use only:  Proceed to Train the Trainer Workshop  Arrange training observation  Advise Essential training |