

Expression of Interest

PPI Initiative BSSH 2019-2021

<b>Name</b>	
E-mail address	
Town/City/Country	
What experience or involvement have you had in hospital health care delivery	
Personal statement (150 words-why you would like to undertake this role and what the BSSH will gain from your participation)	
Do you have sufficient time to contribute to this committee?	
Today's date	

Please email form back to secretariat at BSSH ref PPI  
Email:Helen.Roberts@bssh.ac.uk