**Application for the role of SICSA Graduate Academy Director**

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| Personal Information |
| Title: |  |
| Forename(s): |  |
| Surname: |  |
| University |  |
| Email: |  |
| Telephone Number: |  |
|  |  |
| Current Appointment |
| Current post |  |
| Date of appointment to current post |  |
| Membership of Professional Bodies |
| Date | Name of Professional Body |
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| Summary of supervision experience (including postdoctoral researchers, postgraduates, interns and interdisciplinary supervision). Please include current and completed.  |
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| Indicators of Leadership & Management and Esteem |
| Please provide a list of significant achievements in Leadership & Management and Esteem |
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| Knowledge, Skills and Experience Criteria |
| Please **briefly** address the individual points of the Knowledge, Skills and Experience within the Job Description (4.1 – 4.9) and indicate how you meet these criteria.  |
| Please indicate the involvement you have had with SICSA within the last two years and describe the main reason(s) you would like to be considered for the SGA Director |
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| Please describe your vision for the future of SGA within the role of SGA Director. |
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