**Panel of Dignity and Respect Support Colleagues**

**Expression of Interest Form**

 **(Strictly confidential)**

Prior to completing this expression of interest form, it is recommended that you read the Code of Practice for the Panel of Dignity and Respect Support Colleagues. You are also required to speak with your Head of School/Unit regarding the time commitment involved to fulfil the role of a Dignity and Respect Support Colleague.

The University is keen to ensure that the panel is representative of the wider community and therefore we particularly seek Expressions of Interest from the following:

* Faculty
* Those from diverse backgrounds, including those who identify with any of the protected characteristics under the [University’s 10 equality grounds](https://www.ucd.ie/phpss/about/ediequalitydiversityinclusion/equalitydiversityandinclusiondefinitionsandterminology/).

**Personal Details**

| **Name:**  | **Title:**  |
| --- | --- |
| **Personnel No:**  | **E-mail:**  |
| **Ext No:**  | **Job title:**  |
| **Gender (please put an X beside the best option):*** **Female**
* **Male**
* **Gender non-binary**
* **Prefer not to say**
* **Self-declare: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
 | **Category (please put an X beside the best option):*** **Faculty**
* **Professional**
* **Technical**
* **Research**
 |
| **Work Address:**  |

1. **What, in your opinion, is the role of a Dignity and Respect Support Colleague?**

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1. **Please indicate your reasons or motivation for applying for this role.**

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1. **Please outline any previous experience or role you have undertaken (either within UCD or externally) that could contribute to undertaking the Dignity and Respect Support Colleague role.**

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1. **What are the top three skills/criteria you feel you possess that would enable you to carry out the role of a Dignity and Respect Support Colleague?**

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1. **What support systems do you have in place for yourself?**

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**6. Can you commit to the below time commitments required to fulfil the role of a Dignity and Respect Support Colleague? Please note that this is an approved voluntary activity on behalf of UCD.**

***Training***

I am available for one day of mandatory, in-person training **on April 16th 2024**, delivered by an external provider.

**YES** 

**NO** 

Note: There will be one hour long training session delivered by the Dignity & Respect Support Service once the panel is in place.

***Panel meetings***

Four times per academic term (approximately).

**YES** 

**NO** 

***Culture Change/Outreach Activity***

Four hours of outreach activity over the course of the academic year. Outreach activity can involve lecture addressing, information stands or delivering workshops.

**YES** 

**NO**

***Support Meetings***

One-to-one support meetings (numbers can vary) with employees who are seeking information and support around UCD’s Dignity & Respect policies.

**YES** 

**NO** 

**Section to be completed by Head of School/Unit**

| *I confirm that I am aware of the time commitment involved in the role of a Dignity and Respect Support Colleague, and that I support this employee’s application.***Signed:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
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**Signature of Applicant:**

I have read and understand the Code of Practice and its contents and agree to abide by it.

**Signed:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_