# Advisory Group Application Form

## Details of the opportunity

Thank you for your interest in joining the advisory group for this project. The project aims to help us understand patient and public opinions on:

1. Using big data and artificial intelligence (AI) methods in childhood epilepsy research.
2. Using AI to automate assessments of language and motor abilities in young children.

We want to make sure our research is relevant for babies and young children living with epilepsy, and their families, as well as older children and adults who were diagnosed with epilepsy as a child.

We are looking to recruit members with lived experience of childhood epilepsy to an advisory group/panel - though we may consider group members who don’t exactly meet this requirement where their experiences are considered to be well suited to the project.

The advisory group will provide input at different stages of the project, for example,

* Planning PPIE activities such as focus groups
* Reviewing grant applications or ethics applications
* Co-writing research papers
* Effectively sharing findings from the study
* If it is easier for you to contact us a different way, please let Emma know by email (email address at the bottom of this form)

## Application instructions and closing date

Please complete the below application form with your details. The applications for the initial round close on **1st October**. After this date applications will be accepted on a rolling basis until the advisory group positions have been filled. If you have any questions or would like to discuss the role informally, please contact Emma Casey (contact details included below).

You can complete the application in the following ways:

* Filling out this form on paper, and sending us a copy of it by email
* Filling out this form on the computer and sending it by email
* Speaking to us on the phone or video call
* Sending us a video of yourself by email

## Application form

|  |  |
| --- | --- |
| Title/pronouns |  |
| Full name |  |
| Email address |  |
| Phone number |  |
| I don’t have a phone or email address | *if you don’t have a phone number or email address, please provide details of how we can contact you, this may be through a parent/carer* |
| Age |  |
| Gender | Female (including transgender women)Male (including transgender men)Non-binaryPrefer to self-describe as: …....Prefer not to say |
| Your experience of childhood epilepsy | *Here you can note your experience of childhood epilepsy and whether you are e.g. an adult, parent/carer, young person*  |
| Please tell us about any past experience that you think is relevant for this particular role. *You can answer this part of the application form either in writing in the box below or by submitting a video no longer than three minutes in length by email.*  |
| We're interested in your lived experience and identity as well as your professional or voluntary experience and associated skills. For example, you can tell us about how when your epilepsy began, what type of epilepsy you have, how epilepsy affects day-to-day life and whether you have been part of a similar panel. We are keen to recruit a diverse team to contribute to this project so, if you feel comfortable, please provide as much detail as you can - but please don’t feel that you have to share any information you are not comfortable sharing.  |
|  |
| Why are you interested in this particular role? |
| Here you might like to tell us why this area of research is important to you and/or how childhood epilepsy has impacted you personally. |
|  |
| What could we do to enable you to participate most fully in this opportunity? |
| The advisory group is open to those with additional support requirements. Please tell us what support requirements you have, if any, to ensure accessibility of meetings.You might also like to tell us about: your preferred communication routes, timing of activities, format of activities (e.g. online, in-person / one-to-one, groups)**Note**: While we will make every effort to accommodate your preferred modes of communication, we will need to balance this against the preferred modes of other members of the team. |
|  |
| Are there any aspects of the advisory panel you feel you are not able to participate in?**Note**: We will ask you to attend meetings (online and/or in person) and review documents. |
|  |
| How would you like to be contacted by the research team? |
| * Email
* Phone
* Text message
* Other (please specify):
 |
| How did you hear about this opportunity? (optional) |
|  |

## What happens next?

After this round has closed, Emma will read through your application form with support from her PhD supervisors (Dr. Charlotte Tye, Dr. Michael Absoud and Dr. Nicholas Cummins) and confirm you meet the criteria for membership.

Emma will contact you within 4 weeks of the application deadline. If you are unable to participate in the first activities, you can choose to be added to a secure database to receive information about future patient and public involvement activities for this project.

## Where can I find more information

If you need more information or have any questions, you can contact Emma at: emma.casey@kcl.ac.uk