



MINDFUL EMPLOYER

MINDFUL EMPLOYER+ Application Form

To join the MINDFUL EMPLOYER+ employee adviceline service on behalf of your organisation, please complete the application form below. Your application should be filled out electronically, taking care to answer all mandatory questions (those marked with an asterisk). Once you have finished your application, please return the completed form to us by email at dpt.mindfulemployer@nhs.net.

Please note: Before you can join MINDFUL EMPLOYER+, your organisation must have first signed our Charter for Employers Positive About Mental Health.

1. Your Details				
* Name:				
* Job Title:		* Telephone:		
* Email:				
* Company Name:				
* Company Address:				
* I confirm that my organisation is a current signatory of MINDFUL EMPLOYER's Charter:				
2. Service Details				
* For how long (in years) would you like to subscribe to the service?				
* How many staff, vol	unteers, or other persons, would you li	ke to cover?		
* How often would you like to receive anonymised service usage reports?				

3. Data Protection

3.1. Privacy Statement

MINDFUL EMPLOYER collects and stores the above information for the purpose of setting up the MINDFUL EMPLOYER+ employee adviceline service for your organisation. Upon submitting your application, a copy of the details provided above, excluding your name, job title and contact details, will be shared with the service providers (CiC Wellbeing), who will use this information to administer your account for the duration of your membership. No other information held by MINDFUL EMPLOYER about you or your organisation will be shared with the service providers or any other third parties without your explicit consent to do so.

Will be shared with the service	providers of any other tima parties without your explicit consent to do so.		
* I acknowledge that I have rea	ad and accept the terms outlined in the privacy statement above:		
4. Payment Details			
above. Further payment detail need to raise a purchase order	ons sign-up fee will be raised and sent to the contact outlined in Section 1 is, including payment options, will be included with your invoice. Should you r, or if you would like us to address the invoice to another member of staff or ddress, please provide the relevant details below.		
4.1. Purchase Orders			
Please address all purchase orders to Devon Partnership NHS Trust, Wonford House, Dryden Road, Exeter, EX2 5AF. If you need to raise a requisition order before a purchase order number can be generated, please email us at dpt.mindfulemployer@nhs.net to discuss this further before submitting your application.			
Purchase Order Number:			
4.2. Invoicing Details			
Name:			
Address:			
Job Title:	Telephone:		
Email:			