



Care Innovation Challenge 2019: Team Application Form

Full Name(s) of team member(s)	1. 2. 3.
Email Address(es)	1. 2. 3.
Contact Number	1. 2. 3.
Gender	1. 2. 3.
University/Academic Institution	1. 2. 3.

Please send completed application form to hello@careinnovationhub.org



1. Please share details on each team member including (150 words max):
 - a. What interests you about the social care sector?
 - b. What your main skillsets are and how you add value to your team?
 - c. Have you ever worked/volunteered in social care? If so, please explain

Team Member 1:

Name:

Team Member 2:

Name:

Team Member 3:

Name:

Please explain why you will work well as a team (max 100 words):



3. Are you all available to attend the entire three days of the University Challenge on Friday 29th till Sunday 1st November 2019?

YES NO

All team members will have to independently travel to Cambridge for the event starting at 15:00 on Friday 29th November 2019 and finishes on Sunday 1st December at 17:00.

5. Do all team members accept the responsibility to arrange travel and/or accommodation to take part in the University Challenge weekend?

YES NO

6. In the event you are successful and your team is one of the five teams to go through to the final, are all team members available for the final round and presentation of the Care Innovation Challenge in the Department of Health & Social Care? Date and time TBC in mid-December.

YES NO

7. Do you authorise pictures and videos to be taken of you during the weekend or at the final?

YES NO

8. As participants of the Challenge, I/WE declare that all the above information is correct and true?
(Please enter full team members names acting as signature)

Team Member 1:	<input type="text"/>	Date (dd/mm/yy)
Team Member 2:	<input type="text"/>	<input type="text"/>
Team Member 3:	<input type="text"/>	