



## SHA MS Foundations for the Individual Contributor

### APPLICATION TO PARTICIPATE

Name:

Previous QI Training:

Role:

Phone:

Department:

Email:

Manager/Supervisor:

Area:

Please check that you have read and understood the following

The program runs from June 13, 2022 to March 1, 2023

The program requires approximately 4 hours a week of dedicated learning time

I need access to a computer with internet, a camera, and microphone

Please describe the work-related challenge (over which you have control or significant influence) you think you'd like to work on through the program

Which strategic or operational priority does it align to?

My QI Coach/Mentor is

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

FOR QI COACH/MENTOR

I am prepared to coach and mentor

in this program.

\_\_\_\_\_  
Coach Name

\_\_\_\_\_  
Signature

FOR MANAGER/SUPERVISOR

I support

and their participation in this program.

\_\_\_\_\_  
Manager/Supervisor Name

\_\_\_\_\_  
Signature