



REFERRAL FROM LINE MANAGER/CLINICAL DIRECTOR

Request for Coaching

Staff member details:			
Name		Job role	
Organisation		Email	
Telephone		Mobile	
Work address			
Reason for requesting a coach: (please tick)			
	Leading service improvement or development initiatives		
	Facing a work based challenge		
	Newly appointed to role		
	Personal development		
	Developing Communication Skills Competencies		
	Other (please state)		
Goals for coaching			
Supporting Comments			

Line Manager/Clinical Director details:			
I confirm that I have discussed referral for communication skills coaching with the above named staff member and have provided them with a copy of this referral form.			
Name		Email	
Telephone		Mobile	
Signature		Date	

Please return form to winifred.ryan@hse.ie

If you have any queries, please contact: Winifred Ryan @ 087 629 7028 and winifred.ryan@hse.ie