

REQUEST FOR APPROVAL OF TRAINING RECEIVED IN A LOCUM APPOINTMENT FOR TRAINING (LAT) TOWARDS SURGICAL TRAINING

PLEASE REFER TO THE GOLD GUIDE, 2008 (FOR STRS), OR A MANUAL OF HIGHER SURGICAL TRAINING (FOR CALMAN AND ROI TRAINEES) BEFORE COMPLETING THE APPLICATION FORM

SECTION A (for the Trainee to complete)

Name:

Address:

Specialty:

If you have the Collegiate AFRCS/MRCS/FRCS and started your LAT post, please give title, month, and year of your qualification.....

or

If you started your LAT post after 8th June 2006 or have the Intercollegiate MRCS, please give the date of the award of your Certificate of Completion of Basic Surgical Training (CCBST)*.....

* Only applicable to trainees in the Calman system

Hospital **Deanery**

Dates of LAT: From **To**.....

Duration of LAT in months

Name of absent SpR/ StR (if applicable or if you are a Calman trainee):

Training Number of absent SpR/ StR (if applicable):

I request that training in this post be recognised towards CCT / CSD / CESR CP (if applicable).

Signed: Date.....

(Trainee Signature)

PLEASE ATTACH AN UP TO DATE CV WITH THIS APPLICATION

SECTION B (please forward this form to either the current Training Programme Director, STC Chairman, or Postgraduate Dean to complete)

I certify that the LAT to which the above named has been appointed is within an approved Specialty Registrar training programme in the above named Deanery. The Appointments Committee considered that the training in this post is appropriate to the needs of the above named individual. I confirm that the above named is a locum for a Specialist/ Specialty Registrar.

ST Level of LAT 3 4 5 6 7 8 (all individuals will be placed at level 3 if the level is not circled) or Year 1 for Calman trainees

THIS FORM MUST BE SIGNED BY ONE OF THE FOLLOWING: CURRENT TRAINING PROGRAMME DIRECTOR, CHAIRMAN OF THE TRAINING COMMITTEE OR POSTGRADUATE DEAN

Signed: Date:

Name: Position:

Please return this form **with an up to date CV** to: The Specialty Manager, JCST, 35-43 Lincoln's Inn Fields, London, WC2A 3PE. For further information please contact the JCST Office on: Tel: 020 7869 6250, Fax: 020 7869 6260, Email: jcst@jcst.org