

Name _____ NTN _____

Expected CCT Date/...../.....

West Midlands Deanery

Birmingham School of General Practice

Could you please list all hospitals/ practices where you have worked in the last 12 months:

Name of Hospital / GP Practice

Dates

Name of Hospital / GP Practice	Dates
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Could you please give (in days taken & dates) the following for each hospital worked in:

	Post 1	Post 2	Post 3	Countersigned by personnel or Practice manager
Annual Leave				
Sick Leave				
Maternity Leave				
Study Leave				

Could you please breakdown the study leave into courses, private study, etc.

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Please complete 3-4 weeks prior to your scheduled ARCP and return to:
GP Unit , West Midlands Deanery, 213 Hagley Road, Edgbaston. Birmingham. B16 9RG