**Education and Training Qualifications**

This is to be completed by each individual involved in training in the department to outline qualification and experience in training/assessment.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| General details | | | | | | |
| **Supervisor:** |  | | **Subject Area:** |  | | |
| **Department:** |  | | **Hospital:** |  | | |
| **Job Title:** |  | | **Grade:** |  | | |
| **Relevant qualifications, to include professional qualifications** | | | | | | |
| **Qualification** | | **Where obtained** | | | **Date obtained** | **Class** |
|  | |  | | |  |  |
|  | |  | | |  |  |
|  | |  | | |  |  |
| **Employment history** | | | | | | |
| **Post** | | **Employer** | | | | **Dates** |
|  | |  | | | |  |
|  | |  | | | |  |
|  | |  | | | |  |
|  | |  | | | |  |
| **Relevant experience in scientific specialty** | | | | | | |
|  | | | | | | |
| **Experience of delivering training** | | | | | | |
|  | | | | | | |
| **Recent Publications/Presentations** | | | | | | |
|  | | | | | | |
| **Training time planned:** | | | | | | |
|  | | | | | | |
| **Number of other scientists supporting this area:** | | | | | | |
|  | | | | | | |