







Support for Reapplication to a Specialty Training Programme

This form must be completed for all applicants who have previously been removed or resigned from the specialty training programme that they are applying to re-enter.

Applicants currently training in the specialty who are applying to continue to their training in another HEE Local Office/Deanery, do not need to complete this form.

Applicant Name:	
Applicant GMC/GDC No:	
Specialty and Level Applying	
for:	
HEE Local Office/Deanery where	
training in this specialty was	
previously undertaken	
Reason for leaving specialty	Removal / Resignation
training programme	Delete as appropriate
_	

Unless otherwise stated, the remaining sections should be completed by a Head of School or Training Programme Director, with direct knowledge of your training from the region where you previously undertook training in this specialty. If you have undertaken training in this specialty in more than one region, this should be completed by the region where your removal/resignation from post took place.

Training History – to be completed by your previous HEE Local Office/Deanery Where more than one year of training has been completed in the specialty, please ensure that a separate entry is made for each year of training Additional rows can be added, if needed			
Specialty	Training Level	Dates	

ARCP/RITA History – to be completed by your previous HEE Local Office/Deanery Please ensure that each ARCP/RITA issued for this specialty is entered, even if multiple outcomes were issued for the same year of training. This should not include ARCP outcome 5s. Assessment records for training posts undertaken in other specialties do not need to be recorded.

Additional rows can be added, if needed

Specialty	Training Level	Date of Issue	ARCP/RITA Outcome





Removal/Resignation from Training Programme





programme in this specialty.		
Support for reapplication to the specialty		
In order to re-apply for training in the same spremoved or resigned, they must demonstrate		
of the Postgraduate Dean in the HEE Local C		
was previously undertaken.	, c	ороски,
I was previously involved with this applicant's training in this specialty ¹ . I		
am aware of the issues that resulted in them programme and I am supportive of them reap		Yes/No
this specialty	priving for specially training in	
Reasons for support of reapplication:		
Signed:		
Name		
Name:		
Date:		
Role in trainee's Previous Training:		
e.g. Training Programme Director/Head of School		
HEE Local Office/Deanery:		
TILL LOCAL OTHICE/Deathery.		

 $^{^{1}}$ Where Training Programme Directors/Heads of School have changed since the trainee was in post, the current TPD/HoS should complete the form, having fully established the reasons for removal/resignation









Postgraduate Dean Support for Application:

I confirm that I am the Postgraduate Dean in the HEE Local Office/Deanery where the applicant previously undertook training in this specialty. I have read the reasons why the trainee left the programme and the reasons why the Training Programme Director/Head of School is happy to support their reapplication to the specialty.

I confirm that I am also happy to support their reapplication	Yes/No
i commit that i am also happy to support their reapplication	1 00/110

Applicant's Name:	
Signed:	
Name:	
Date:	
Role:	Postgraduate Dean ²
HEE Local Office/Deanery:	

Once fully signed, this form should be returned to the applicant who **must** submit this to the appropriate Recruitment Office by no later than the closing date for applications. Failure to provide this by the deadline may result in an application being withdrawn.

Please note, no other evidence will be accepted as evidence of support for reapplication to a specialty.

² Where the Postgraduate Dean is not available to sign the form, it must be signed by a Deputy authorised to sign on behalf of the Postgraduate Dean.