**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.

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