**MS Forms**

**Application Form Questions F2 SFP Placement 2026-27**

**The deadline for FY1 submitting this application form is 31st March 2026**

**Please complete all sections of the application form.**

**The form should not be extended beyond 3 sides of A4.**

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| **Section 1: Personal Details** | |
| **Your full name** |  |
| **Your email address** |  |
| **Your phone number** |  |
| **Are you in a Research Post or Medical Education Post?** |  |
| **What YHFS Region are you in?**  **(East, West or South)** |  |
| **What is your SFP Programme Oriel no**  **e.g. WY2026-SFP001** |  |
| **When does your SFP placement start?**  **e.g. 5/8/2026** |  |

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| **Section 2: Supervisor Details** | |
| **What is your F2 Academic Supervisor(s) name(s)** |  |
| **What is your F2 Academic Supervisor(s) email(s)** |  |
| **What Academic Unit or Group are you working with? e.g. Department of Histopathology:** |  |
| **What is the Academic Unit or Group Website?**  **(if none, please type N/A)** |  |
| **What is the Academic Unit or Group address?** |  |
| **What is the title of your F2 project** |  |
| **Where will your F2 project be based?**  **(include Speciality and base)** |  |
| **Please provide a description of your F2 project and its background:** |  |
| **Please outline arrangements for the project with particular reference to funding:**  **(if none type N/A)** |  |
| **Please outline any ethical approval arrangements for your F2 project:**  **(if none, type N/A)** |  |
| **Please outline your F2 project aims:** |  |
| **Please outline your F2 project methodologies:** |  |
| **Please describe the training you will receive and what access to Research or Medical Education Facilities will be given:** |  |

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| **Section 3: Background References, if applicable (Only Include Top 5. If none please type N/A):** | |
| **Background Reference 1:** |  |
| **Background Reference 2:** |  |
| **Background Reference 3:** |  |
| **Background Reference 4:** |  |
| **Background Reference 5:** |  |
| **Section 4: Outline your F2 project plan by month (including literature review, presentation and writing up and assessment of the placement):** | |
| **Project Plan: Month 1:** |  |
| **Project Plan: Month 2:** |  |
| **Project Plan: Month 3:** |  |
| **Project Plan: Month 4:** |  |

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| **Section 5: Academic Supervisor Agreement** | |
| **Has your supervisor read and approved this application and are they happy to approve your application – Y/N** |  |

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| **To be completed by the proposed Academic Supervisor:** | | | | | |
| **Academic Supervisor for F2 Specialised Foundation Programme Placement** | | | | | |
| **Name:** |  | **Signature:** |  | **Date:** |  |

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| **To be completed by YHFS after submission on the 31st of March 2026** | | | | | |
| **Foundation Training Programme Director / Academic Lead** | | | | | |
| **Name:** |  | **Signature:** |  | **Date:** |  |
| **Deputy / Foundation School Director** | | | | | |
| **Name:** |  | **Signature:** |  | **Date:** |  |
| **Approved** | | | | | **Yes / No** |