

Faculty Educational Governance Statement

Trainee's Name:

Firstname Lastname

Trainee's GMC:

GMC Number

Trainee's Post:

Grade, Location, Start Date to End Date, Specialties

Date of statement:

dd/mm/yyyy

Faculty present (names and designations):

The faculty are of the opinion that the trainee is ready to progress to the next year of training:

Yes No

If "no", please summarise evidence in support of this decision:

Trainee's strengths:

Elements to work on in next post:

Close