**APPENDIX A: Pre-absence Form**

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| **Return to Training: Pre-Absence Form**  |
| **SECTION A (to be completed by the Trainee)** |
| **Date of Pre-Absence Meeting:** Click here to enter text. |
| **Trainee Surname:** Click here to enter text. | **Trainee Forename:** Click here to enter text. |
| **NTN:** Click here to enter text. | **GMC No:** Click here to enter text. |
| **Specialty:** Click here to enter text. | **Grade (CT/ST etc):** Click here to enter text. |
| **Educational/Supervisor Name:**Click here to enter text.**Email address:** Click here to enter text. | **FPD/TPD Name:**Click here to enter text.**Email address:** Click here to enter text. |
| **Place of training prior to absence:** Click here to enter text. | **Anticipated place of training on return:** Click here to enter text. |
| **Date absence commenced:** Click here to enter text. | **Anticipated date of return:** Click here to enter text. |
| **Reason for absence:** Click here to enter text. |
| **Are you happy for HEE (local office) to contact you whilst you are absent?**  | **Yes**(complete 1,2) | **No**(move to section B) |
| **Preferred Email Address(1):** Click here to enter text. | **Phone Number(2):** Click here to enter text. |
| **Section B (to be completed by the Trainee, ES or TPD)** |
| **Please provide detailed summery of the discussion between the Trainee and appropriate educator/supervisor.** Discussion should include (but not limited to)* CPD considered (including KIT/SPLIT days)
* Any work that may be done during absence i.e. on calls, KIT/SPLIT days etc.
* Sign posting to internal/external Return to Training Activities
* Any concerns over time away and returning
* Learning & training needs (including possible assessments or courses that the trainee should attend)

Click here to enter text. |
| **Appropriate Educator/Supervisor Name:** Click here to enter text.**Email address:** Click here to enter text.**Signature: Date: Click here to enter text.** |
| **Trainee Name:** Click here to enter text.**Signature: Date: Click here to enter text.** |

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| **Once completed please send a copy of this form to the FOUNDATION/TRAINING PROGRAMME DIRECTOR and HEEYH SuppoRTT team****A copy also needs to be retained in your e-portfolio** |