

Application Form – Anatomical Society Anatomy Training Programme 2020-2021

You should read 'How to Apply' and the 'Brief Module Overview Documents' on the website at http://www.anatsoc.org.uk/Education/AnatomyTrainingProgramme.aspx or under 'Education' and 'Anatomy Training Programme' before you apply. All sections of the form must be completed. Please return your completed application form BY E-MAIL to the Anatomical Training Programme Management Board c/o maryanne.piggott@kcl.ac.uk.

Deadline for receipt of the Application Form is 1 August 2020 if you intend to join the programme commencing 1 September 2020.

IMPORTANT:

Registration on the Programme or distribution of the module material will only be completed on receipt of the Training Programme fee OR with a note from your institution stating that they will pay the full fee (to be sent to the Treasury – see p5 below).

A. ABOUT YOU

1. APPLICANT'S DETAILS

	Contact Address
Title: (Dr/Mr/Mrs/Miss/Ms, etc.)	
First names in full	
	Postcode
Preferred first name	
	Telephone number (including code) Ext
	Day
Surname/family name	Eve
	Email address
Your date of birth (example 23 March 1995) Day Month Year	
Country of residence	
Nationality	

2. UNIVERSITY/COLLEGE EDUCATION AND PROFESSIONAL QUALIFICATIONS

From month/year	To month/year	University/college attended	Full-time Part-time	Subjects read	Qualifications	Dates and classes of awards
If any of y	our qualificat name here.	tions were obtained under a	a name differe	ent from the one give	n in Section 1, ple	ase
First name	е		Surname			
3. P	RIZES, SCH	OLARSHIPS OR DISTING	TIONS			
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5. FACILITIES

Please state the teaching/ research facilities (e.g. library, electronic resources, laboratory, cadaveric material) you will be using and the name and address of the institution(s) where they are located. Indicate

against each whether or no institution).	it you already r	nave access t	o these faciliti	es (e.g. as an er	nployee of the	€
6. DETAILS OF APP	LICANT'S ME	NTOR				
The applicant must have th academic at applicant's ow complete this section.						
Title (Professor/Dr, etc.)						
First name(s)						
Surname						
Institution name						
Institution Address						
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Postcode	_]	
Telephone number (inclu	uding code)					
E-mail address						
Signature						
Date						
7. LINE MANAGER/H					d b oforo on o	.i.a. fa. 41a
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Title (Professor/Dr etc.)						

First name(s)					
Surname					
Institution name					
Institution Address					
Postcode					
Postcode					
Telephone number (inc	luding code)				
E-mail address					
Signature					
Date					
8. FURTHER STUD Are you undertaking or ha Education of equivalent?	ave you already		y for a Postgraduate	Certificate in I	Higher
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Institution	Title of Co	urse	Commencement date of the programme of study	Award	Date of Award
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Institution 9. REFEREES	Title of Co	urse	date of the programme of	Award	
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9. REFEREES Name two people whom to should normally be a tuto studied and the other, you for example, women using	he Anatomical S r or other memb ur most recent e g a married nan	Society can cons per of the academ employer. Please ne should indicate	ult in confidence aborate staff of the universay if your referees k	ut your applica	ation. One at which you nother name;
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Email	Email	
Position held	Position held	

B. PROGRAMME OPTIONS FOR APPLICANTS BEGINNING SESSION 1 SEPTEMBER 2020

1. PLEASE INDICATE WHICH MODULES YOU WILL BE UNDERTAKING:

You may apply for a single module, two per year, the whole Programme, or any subset.

MODULE CODE	TOPIC	YEAR	CREDITS	FEE (£)	RESIDENTIAL SCHOOL (compulsory)	INTENDED MODULES (please tick applicable)
ATP1	Limbs	2020/21	20	250	July 2021	
ATP2	Head and Neck	2020/21	20	250	July 2021	
ATP3	Trunk	2021/22	20	250	July 2022	
ATP4	Neuroanatomy	2021/22	20	250	July 2022	

The fee includes tuition costs and course material, but <u>does not</u> include travel expenses, accommodation or meals on the Residential Programmes. The Society reserves the right to amend the fees for future courses.

Successful completion of all modules will lead to the award of a Programme Certificate. Successful completion of a module will lead to the award of a Module Certificate.

2. RESIDENTIAL SCHOOL

Please note that attendance at the relevant Residential School(s) is normally compulsor	r y. To help our
planning, please indicate whether you will require accommodation, and if you have any dietary	requirements
(or any other requirements we should know about).	

Accommodation	
Dietary requirements	

3. PAYMENT

Payment for the Anatomy Training Programme should be in pounds sterling (£) to the following account:

Bank name: Coutts & Co

Bank account: Anatomical Society

Bank account number: 00469750

(or IBAN: GB46 COUT 1800 0200 4697 50)

Sort code: 18-00-02

NB: Please quote 'ATP_Invoice Number' as your reference. An invoice will be sent to you after acceptance on to the programme. Once you have paid your fees, can you please e-mail the Anatomical Society Treasury: treasurer@anatsoc.org.uk with the relevant details (i.e. who is making the payment and the bank reference).

Anatomical Society members may apply for an annual bursary of up to £350 per module (up to a maximum of two years) towards the fees and cost of the Programme. The Bursary Application Form is available on the Society's website: http://www.anatsoc.org.uk/Awards/GrantsandPrizes/AnatomyTrainingProgramme.aspx

C. FURTHER INFORMATION

1. FURTHER INFORMATION This information is to help The Anatomical Society ensure that appropriate services are provided at the applicant's host institution. It will not be used for the purposes of selection. Have you any additional requirements that might affect your No Yes Please tick one box study?

I understand that the information I provide will be treated as confidential by the Anatomical Society and will be made available to Anatomical Society staff and to agents of the Anatomical Society as appropriate, solely for the purpose of providing me with appropriate facilities and for statutory purposes. I hereby consent for the information to be processed for this purpose.

The information you provide will be held on Anatomical Society databases. It will be used for relevant Society mailings and used to process your application and stored in accordance with the Data Protection Act 1988 and subsequent legislation.

I consent to the data included in this submission being collected No processed and stored by the Anatomical Society

Yes Please tick *one* box

The Anatomical Society reserves the right to withdraw any offer made on the basis of information that proves to be untrue or misleading.

All Programme material in whatever form/format is for the trainee's sole use and is protected by the appropriate legislation and best practice. Material where used by a trainee must be fully referenced and acknowledged.

Please make sure that you have completed <u>ALL SECTIONS</u> of the application form and return the form to the e-mail address at the top of the form by 1 August 2020 to join the programme for 2020-22. In order to be considered for the Programme, please <u>E-MAIL</u> the application form as detailed above.

Applicant's Signature	Date

File: ATP-Application Form-2020-22-v2ApprovedTWKMcD-100720

If so, please enclose a separate letter giving details.