

Application Form – Anatomical Society Anatomy Training Programme 2018-19

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 2018 if you intend to join the programme commencing 1 September 2018.

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 Honorary Treasurer of the Society – see 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 1975) Day Month Year | |
| Country of residence | |
| | |
| Nationality | |
| INATIONALIV | |

| If any of your qualifications were obtained under a name different from the one given in Section 1, ple enter the name here. First name 3. PRIZES, SCHOLARSHIPS OR DISTINCTIONS 4. EMPLOYMENT From To month/year Position held and place of work Name and address or employer | n/year m | o nonth/year | University/ | college attend | | ıll-time art-time | Subje | cts read | | Qualifications | Dates and classes of awards |
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| material) you v | ne teaching/ r will be using a | and the name | and address of | of the institution | esources, laborat n(s) where they a es (e.g. as an em | are loca | ated. Indicate |
| | | | | | | | |
| The applicant | must have the | | rom a person | | as his/her mentor e. Please ask yc | | |
| Title (Profess | sor/Dr, etc.) | | | | | | |
| First name(s) |) | | | | | | |
| Surname | | | | | | | |
| Institution na | me | | | | | | |
| Institution Ad | ldress | | | | | | |
| | | | | | | | |
| Postcode | | | | | | | |
| Telephone i | number (inclu | ding code) | | | | | |
| E-mail addr | ess | | | | | | |
| Signature | | | | | | | |
| Date | | | | | | | |
| The applicant | must have the | e agreement o | | manager or de | epartmental head | | applying for the |
| Title (Profess | sor/Dr etc.) | | | | | | |

| First name(s) | | | | | | | | |
|--|---------------------------------|---|-------------------------------|-------------------------------------|--|------------------------------------|--|-------------------------------|
| Surname | | | | | | | | |
| Institution name | | | | | | | | |
| Institution Address | | | | | | | 1 | |
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| Telephone number E-mail address | (includ | ding code) | | | | | | |
| | | | | | | | | |
| Signature | | | | | | | | |
| | | | | | | | | |
| 8. FURTHER S' Are you undertaking of Education of equivale | or have | | | tudy fo | or a Postgradua | ite Certifi | cate in Hiç | gher |
| | | 1 | | | | | | |
| Institution | | Title of Co | urse | | Commenceme date of the programme of study | | rd | Date of Award |
| Institution | | Title of Co | urse | | date of the programme of | | ırd | |
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| Institution | | Title of Co | urse | | date of the programme of | | ird | |
| Institution | | Title of Co | urse | | date of the programme of | | ird | |
| Institution | | Title of Co | urse | | date of the programme of | | rd | |
| 9. REFEREES Name two people who should normally be a studied and the other for example, women when referees are ap | tutor or , your r using a | Anatomical S r other memb most recent e | Society can coper of the acac | onsult demic ase sa | in confidence a staff of the univ | bout you ersity or es know y | r applicati college at ou by anc | on. One which you other name; |
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| Email | Email | |
|---------------|---------------|--|
| Position held | Position held | |

B. PROGRAMME OPTIONS FOR APPLICANTS BEGINNING SESSION 1 SEPTEMBER 2018

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 | 2018/19 | 20 | 250 | July 2019 | |
| ATP2 | Head and neck | 2018/19 | 20 | 250 | July 2019 | |
| ATP3 | Trunk | 2019/20 | 20 | 250 | July 2020 | |
| ATP4 | Neuroanatomy | 2019/20 | 20 | 250 | July 2020 | |
| ATP1 | Limbs | 2020/21 | 20 | 250 | July 2021 | |
| ATP2 | Head and Neck | 2020/21 | 20 | 250 | July 2021 | |

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 compulsory. To help | our |
|---|------|
| planning, please indicate whether you will require accommodation, and if you have any dietary requirement | ents |
| (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 'TrainProg_Surname_First name' as your 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 Nο Yes Please tick one box study? If so, please enclose a separate letter giving details. 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 Please tick one box No Yes processed and stored by the Anatomical Society 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 ALL SECTIONS of the application form and return the form to the e-mail address at the top of the form by 1 August 2018 to join the programme for 2018-2020. In order to be considered for the Programme, please E-MAIL the application form as detailed above.

Equal Opportunity Form

Applicant's Signature

In order to monitor its equal opportunity policy, the Anatomical Society routinely collects information about its applicants. Please complete this section about ethnic origin on the application form.

Date

You are under no obligation to complete this section of the form, and if you choose not to, your chance of being offered a place will not be affected.

Ethnic origin code (Please circle the most appropriate code)

| White | Black or Black British | Asian or Asian British | Mixed | Other |
|-----------|---------------------------|---------------------------|---------------------------------|----------------------------|
| 1 English | 6 Caribbean | 9 Indian | 14 White and Black Caribbean | 18 Other Ethnic background |

| 2 Welsh | 7 African | 10 Pakistani | 15 White and Black African | 19 Information refused |
|--------------------------|--------------------------|---------------------------|-------------------------------|------------------------|
| 3 Scottish | 8 Other Black background | 11 Bangladeshi | 16 White and Asian | |
| 4 Irish | | 12 Chinese | 17 Other Mixed background | |
| 5 Other White background | | 13 Other Asian background | | |

| Which of the following | g describes how you think of yourself? (Please tick one option): |
|------------------------|--|
| Male | |
| Female | |
| In another way | |

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