

FRANZCOG Training Supervisor Application

Name:	
Address:	
Phone:	Email:
Specialist qualifications:(must be a Fellow of RANZCOG)	
Years in practice as an O&G specialist:	
Present practice:	
<input type="checkbox"/> Full time <input type="checkbox"/> Part-time <input type="checkbox"/> Private <input type="checkbox"/> Salaried	
What medical appointments do you hold? (please specify)	
Name of hospital where you intend to supervise Basic and/or Advanced trainees:	
Will you be:	
<input type="checkbox"/> an additional Training Supervisor at this hospital	
<input type="checkbox"/> replacing an existing Training Supervisor at this hospital. Name of Training Supervisor, and is this Training Supervisor resigning (please specify)	
Type of trainees you will be supervising	
<input type="checkbox"/> Basic <input type="checkbox"/> Advanced <input type="checkbox"/> CWH/PTP/APTP	
Training Supervisor commencement date:	

Training/Supervision Experience

Do you have past experience in teaching or supervising? note: Advantageous, but not essential)

Medical undergraduate Yes No

Postgraduate Yes No

If yes, please specify:

Are you presently engaged in teaching or supervising? note: Advantageous, but not essential)

Medical undergraduate Yes No

Postgraduate Yes No

Other Yes No

If yes, please specify:

Completion of Clinical Educator Training Program (CET) (compulsory)

All prospective FRANZCOG Training Supervisors must also complete the Clinical Education Training Program (CET Part 1 and CET Part 2) prior to submitting a training supervisor application form (or attending the Training Supervisor Workshop). <https://ranzcog.edu.au/training-topics/clinical-education-training-cet/>

Documentation Checklist

I have completed CET Part 1 and CET Part 2, certificate attached to application

I have attached my current CV

Endorsement of Application

Name of Head of O&G (or equivalent) at hospital where FRANZCOG Training Supervisor will be located

I endorse the appointment of the above-mentioned applicant as Basic and/or Advanced Training Supervisor.

Signature, Head of O&G (or equivalent)	Date
Signature, Training Supervisor applicant	Date

Submission of Application

Email your completed application, CET Certificates and CV to your local State/Territory/ New Zealand office (listed below). Your application will be tabled at the next scheduled meeting of the State/Territory/New Zealand Training Accreditation Committee (TAC).

Note: your appointment as a Training Supervisor is not official until formally approved at the relevant TAC meeting.

New South Wales/ ACT nsw@ranzcog.edu.au	Queensland gld@ranzcog.edu.au	Victoria/Tasmania vic-tas@ranzcog.edu.au
South Australia/ Northern Territory sa-nt@ranzcog.edu.au	Western Australia wa@ranzcog.edu.au	New Zealand ranzcog@ranzcog.org.nz