**Careers Support Form**

**Name of trainee:** ………………………………………………  **GMC number:** ……………………………...……….........

**Person providing support:** ………………………………… **Date of Meeting:** …………………………………………

* **Careers support is designed to facilitate your own career planning (i.e. not instant answers to all career-related issues).**
* **The form is recommended for either a self-assessment of your current career plans or in preparation for a scheduled career meeting**
* **Completing this form will help to ensure you gain maximum benefit from any career meeting**

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| **Theme** | Questions | **Assessment** | |
| **Current**  **Status** | Using the scale provided please rank your current satisfaction with your career plan out of 8 (with 1 being totally dissatisfied and 8 being totally satisfied) | Please complete before starting your assessment  1 2 3 4 5 6 7 8 | |
| **Expectations** | a) What do you expect from this self-assessment / meeting?  e.g.  *“How to make a career choice”* “How to progress your career aspirations” *“How and where to find more information”*  b) If you are having a careers support meeting, please reflect on your expectations and try to decide how you can realistically meet them during the meeting. |  | |
| **Extrinsic stressors** | a) Are there any particular stresses or pressures from others, which may be affecting your ability to make a clear career plan?  b) What do you think you could do about these? |  | |
| **Intrinsic factors** | a) Have you considered any of these factors, about yourself, when making your career choices? b) Tick the boxes you have considered and, if you are having a careers support meeting, indicate with an asterisk those which you most wish to discuss during the meeting.  To learn more about these factors – click [here](http://www.medicalforum.com/factors.aspx?)  . | * Personality * Values * Ambition * Drive/energy * Experience(s) * Qualifications * Motivations * Finances | * Health/stress * Social situation * Desire to learn * Strengths/weak * Skills * Self awareness * Dreams * Fears |
| Vision | Do you have a vision of your intended career?  (Even if you are sure of what you want to do, please list)  a) the three careers you would most like  b) the three careers you would least like  Analyse what it is about each of these careers that has makes you like or dislike them | 1. **Most**   1…………………..  2……………………  3…………………… | **b) Least**  1……………………  2……………………  3…………………… |

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| --- | --- | --- |
| **Theme** | Questions | **Assessment** |
| **Resources** | a) What resources have you used to make your career choices? *Tick the boxes you have used (or will use after the meeting)*  *If you are having a careers support meeting, indicate with an asterisk those which you most wish to discuss during the meeting (this may include boxes you have not ticked)*  b) If you ticked ‘not used any resources’, why do you think this is? | * Past experience * Talking to senior colleagues/ peers * Talking to family * Tasters * [LETB websites](http://www.mmc.nhs.uk/colleges__deaneries/deaneries.aspx) * [Royal College websites](http://www.mmc.nhs.uk/default.aspx?page=640) * [BMJ Careers website](http://careers.bmj.com/careers/hospital-medical-healthcare-doctors-jobs.html) * [Medical Careers website](http://www.medicalcareers.nhs.uk/) * [Medical Specialty Training website](http://www.mmc.nhs.uk/specialty_training_2010.aspx) * [GP Speciality Training website](http://www.gprecruitment.org.uk/) * <http://www.medicalforum.com/> * [Psychometric or other tests e.g. Sci59](http://medicalforum.com/Resources/Publications/psychometrics.aspx?) * Careers fairs ([National](http://careersfair.bmj.com/en/1/home.html), local) * [Books](http://medicalforum.com/Resources/Publications.aspx?) * Careers lectures * Other * Have not used any resources |
| **Needs** | a) Consider how each of the following might be affecting your career plans:Relevant clinical experienceSpecific qualificationsSpecific competencies Career management skills [(CMS)](http://www.medicalforum.com/CMS.aspx?)Any other factors not listed above b) If you are having a careers support meeting, please rank them in the order that you would most like them to be addressed during the meeting (in case of inadequate time to address all of them) | 1.  2.  3.  4.  5. |
| **Plan of Action** | a) Do you have an action plan? b) If yes, what is your action plan for progressing your career development? c)Please add a provisional target date for completing each item in your action plan | Yes/No |
| **Notes** | Please record any notes from your self-assessment and / or careers support meeting here |  |
| **Review of**  **Status** | Using the scale provided please rank your current satisfaction with your career plan out of 8 (with 1 being totally dissatisfied and 8 being totally satisfied) | After finishing your self assessment  1 2 3 4 5 6 7 8  After your careers support meeting  1 2 3 4 5 6 7 8 |

*If you have questions about how this form was developed, suggestions for modification or other feedback, please contact the form’s originators:*

*Dr Ian Barton at East of England LETB and Dr Sonia Hutton-Taylor at Medical Forum using this* [*form.*](http://medicalforum.com/Contact/CSF.aspx?)

*This form integrates with Career Guidance Essentials Toolkit (CGE-T) - a resource of workbooks and PowerPoint presentations for providers and seekers of career planning support which can be found in the free tutor or guest membership area at*  [www.medicalforum.com](http://www.medicalforum.com/)

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