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| --- | --- |
| **Name:** |  |
| **Qualifications:** |  |
| **Email address:** |  |
| **Mobile phone number:** |  |
| **Training Programme:** | **ACCS EM** |
| **Region:**  | **East of England** |

Deadline for submission: 1st March 2019

Please submit this form by email to: Nam.Tong@qehkl.nhs.uk

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| **Name of Educational Supervisor:** |  | **Email address:** |  |
| **Name of Training Programme Director:** |  | **Email address:** |  |

If successful in your application for a Global Health Fellowship your contact details i.e. email address and telephone number will need to be disclosed to Africa Health Placements (AHP) in order for them to contact you to begin the registration process. Please therefore mark the box below to confirm you are happy for us to forward this information.

I give consent for you to share contact information to AHP 🞏

Please provide evidence for each of the below selection criteria. We strongly encourage you to consider the person specification on the website. You may use bullet points and you should write **no more than 150 words** per box. Words over the limit will be discounted.

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| --- |
| 1. **Relevant experience working or travelling oversea’s**
 |
| Consider the following1. During a gap year post education
2. Medical Student Elective
3. Post Foundation Year 2

 **Score out of 5:**Word count: |
| 1. **Why do you want to undertake a GHF OOPE**
 |
|  **Score out of 5:** Word count: |

|  |
| --- |
| 1. **Outline what you would like to achieve during your GHF year**
 |
| Consider the followingA) Personal BenefitsB) Benefits to the NHSC) Benefits to the local community and host country  **Score out of 5:** :Word count: |
| 1. **Demonstrate your commitment for a 12 month deployment to a rural low resource community overseas**
 |
|  **Score out of 5:** Word count: |

 **Total score out of 20 =**