

Extended skills placement approval form - Registrar



GP Training

The following application must be completed and submitted to your medical educator three months prior to the proposed commencement date.

Registrar name

Proposed extended skills placement (ESP)

Nominated supervisor

Is the Extended Skills Training site currently RACGP accredited (Yes or No)

☐ Y ☐ N

If no, please refer the training site or potential supervisor contact to the *RACGP Accreditation of Extended skill training sites guide*. Please note that the accreditation process may take up to 6 months

Level of registrar at the time of application:

- ☐ Hospital registrar
☐ GPT1
☐ GPT2
☐ GPT3

Have you been offered a position at the Extended Skills training site? (Yes or No)

☐ Y ☐ N

Planned commencement of ESP e.g. Semester 1, 2024

Is the extended skills position:

- ☐ Full time
☐ Part time

Proposed working hours per week

What is your motivation in applying for this placement? Include information of identified learning needs and how they were identified

What are your expected learning outcomes for the placement?

What skills do you hope to achieve and how will you maintain these skills?

Why do you believe this is the best time in your GP training for you to complete this placement?

Once approved and commenced in the placement, please discuss your expected learning outcomes with your supervisor. Following the placement, the registrar is required to complete a reflection of their experience and arrange for completion of a supervisor assessment using the [Extended skills placement registrar reflection and assessment form](#).

Registrar Signature

Date

Internal use

Training Coordinator Signature

Date

Medical Educator Signature

Date