**Severn Foundation School F2 Study Leave Application Form**

Must be completed **PRIOR** to study leave dates applied for

F2s may be eligible for study leave funding/expenses. Please see [Study Leave Guidance](https://foundation.severndeanery.nhs.uk/about-us/study-leave/) for further details.

F2

|  |  |  |  |
| --- | --- | --- | --- |
| **Surname** |  | **Forenames** |  |
| **Trust** |  | **Specialty** |  |
| **GMC Number**  |  | **Tel No** |  |
| **Work Email** |  | **Personal Email** |  |

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| **Details of Study Leave** |
| **Dates** | **From:** |  | **To:** |  | **No of days applied for** |  |
| **Purpose of Study Leave** | **Additional details for RT/ALS/Taster** | **Location of RT/ALS/Taster** |
| F2 Regional Teaching 🞎 |  |  |
| ALS / e-ALS 🞎 |  |  |
| Taster Days 🞎 |  |  |
| Other 🞎 | If “Other” please complete additional information below |
| **Course/Event Title** |  |
| **Website** |  |
| **Venue/Location** |  |
| **Course/Event Cost** | **£** |  | **Travel/Accommodation Cost** | **£** |  |
| **Reason for attending** |  |
| **Link to PDP on Horus** |  |

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| I have booked leave in my department and can be released on the above dates | **Yes / No** |
| **Educational Supervisor’s Signature** |  | **Date** |  |
| **Rota Registrar/Manager’s Signature** |  | **Date** |  |

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| **Applicant’s Signature** |  | **Date** |  |

**When completed, return to your Postgraduate Centre to be signed by your Foundation Programme Director.**

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| My FP Director has agreed that the activity relates to my Foundation curriculum/PDP, and I have completed a PDP entry on Horus. | **Yes / No** |
| **FP Director’s Signature *(if required)*** |  | **Date** |  |