

QUICK GUIDE ON FORM Rs

Please tick only one of these six options:	
I confirm I have been appointed to a programme leading to award of CCT.	<input checked="" type="checkbox"/>
I confirm that I will be seeking specialist registration by application for a CESR.	<input type="checkbox"/>
I confirm that I will be seeking specialist registration by application for a CESR CP.	<input type="checkbox"/>
I confirm that I will be seeking specialist registration by application for a CEGPR.	<input type="checkbox"/>
I confirm that I will be seeking specialist registration by application for a CEGPR CP.	<input type="checkbox"/>
I confirm that I am a core trainee, not yet eligible for CCT.	<input type="checkbox"/>

Form R Part A

- All boxes to be filled in, where not pre-populated
- **CCT Tick box** - only the first option should be ticked/crossed

Form R Part B Section 1 & 2

- Doctors Details
- Scope of Practice

Whilst most of the information on **Section 1** replicates information from the Form R Part A, this section must be completed in full
Section 2 - there should be no gaps in your work history and cannot be left blank
TOOT cannot be left blank, even if no time out has been taken, a **0** must be in the total box

Form R Part B Section 3

You must tick/cross **all** relevant boxes in questions 1 to 3, no boxes can be left blank

- Declarations relating to Good Medical Practice

Form R Part B Section 4

- Update to previous Form R Part B

If you did not declare any significant events in your previous Form R or this is your registering Form R, please tick/cross **option 1**
 If you declared any significant events in your previous Form R, please complete **option 2** and/or **option 3**

Form R Part B Section 5

If you have nothing new to declare, please tick/cross this option as this section cannot be left blank
 If you have had a significant event, complaint or other investigation since your last Form R please complete this section in full

- New declarations since previous Form R Part B

Form R Part B Section 6

- Compliments

Section 6 is the only section of the Form R which is not compulsory

Form R Part B - Section 7

This section must be signed and dated and cannot be left blank

- Declaration

Form Rs are requested on commencement of training AND ahead of every ARCP
All Form Rs should be submitted to
gpspecialtytraining.nimdtg@hscni.net