

Application for the Graduate Representative position

Thank you for your application to the Graduate Representative position on the Tripartite Committee of Rural Generalist Anaesthesia.

Please check that your application process is completed by:

- Completing this application form
- Sending the form as an attachment to rga@anzca.edu.au and Subject: *Graduate Representative on TC-RGA*
- Adding your current curriculum vitae as an additional attachment

Applicant details

College ID (if already a member of the college)

First name _____

Surname _____

Date of Birth _____

Address _____

Mobile _____

Email _____

Fellowship Qualification: ACRRM RACGP Date of fellowship: _____

Current trainee: ACRRM RACGP RGA completion date: _____

Do you have a JCCA/DipRGA letter of satisfactory completion of training or a statement of equivalence?
 Yes No If yes, date of issue of JCCA/DipRGA: _____

What is the reason for applying to be a Grad Rep?

Referee's details (at least one of whom must be a current or past supervisor of training)

Referee 1	Referee 2
Name: _____	Name: _____
Position: _____	Position: _____
Hospital Name: _____	Hospital Name: _____
Email: _____	Email: _____
Phone: _____	Phone: _____

Declaration

I declare that the statements made in this application are true and accurate.

Signature _____ Date _____

Please send your completed form to the college:

ANZCA RGA Training

Email: rga@anzca.edu.au

For further information, please contact us at +61 3 9510 6299