

GP FORM R – EXPLANATORY NOTES

Please ensure you read these notes carefully before completing your Form R.

1. Please use the same name you put on your original application form when you applied for your rotation, as this is the name we will have on our database. If your name has changed since your original application form, please include proof of the change i.e. marriage certificate etc, so we can update our database.
2. This will be London, even if you have/are transferring from another deanery.
3. Please include your current London (or surrounding area) address so we have the most up to date details on our database. All correspondence will be sent to this address.
4. This address will not be used as a contact address, and all correspondence will go to your primary address above. However, it is useful for us to have an alternative contact address on our records.
5. Please state here the name of your medical school from which you qualified.
6. Please state your immigration status i.e. resident from birth, residency granted in January 2000, work permit approved in January 2000 etc.
7. Please state your GMC number
8. IGNORE THIS QUESTION. This is not applicable to General Practice.
9. Ignore the first part of this box when it is referring to your NTN. This will be allocated to you once we receive and process your form R. You will be informed of this number via email. If you are/have transferred from another deanery, please **don't** put down the number you were previously issued; you will be issued another number with a London code.

You need to tick the box in this question, if you will be apply for a straightforward CCT at the end of your training. This means you are doing a standard London Deanery rotation, with all posts approved for GP Training. For your information, this means you will be applying for your CCT (Certification of Completion of training) through Article 10.
10. IGNORE THIS QUESTION. This will be completed by the Deanery.
11. This will be General Practice.
12. IGNORE THIS QUESTION. This is not applicable to General Practice.
13. This will be the RCGP/GMC
14. This will be the end date you started/are going to start your training with the London Deanery.
15. Please indicate here whether you were originally appointed to full or part-time training.
16. This will be the date you are estimated to finish your training with us.

17. Please ignore and leave this box blank if you have ticked the box in question 9. Only tick the box in this question if you are applying for a CEGPR (Certification of Eligibility to the GP Register) – Article 11, rather than CCT. You should apply for CEGPR if the GMC hasn't prospectively approved the entirety of your specialty training programme, including if:
- a. You aren't doing a standard London Deanery rotation
 - b. Any previous posts you undertook aren't approved for GP.

Remember to put in your date of completion of training (should be the same date in question 16).

Please ignore any reference to CESR as this doesn't apply to general practice.

REMEMBER: IGNORE THIS QUESTION COMPLETELY IF YOU HAVE TICKED QUESTION 9.

18. IGNORE THIS QUESTION. This is not applicable to GP.

If you have any problems completing this form after following the above instructions, please contact the GP Assessment Team by emailing epportfolio@londondeanery.ac.uk

Please return your completed form with photograph attached to:

**GP Assessment Team
GP Department, 3rd Floor
Stewart House
32 Russell Square
London
WC1B 5DN**