

# Faculty of Pre-hospital Care Student and Junior Trainee Group

## Student Regional Representative Application

Region: \_\_\_\_\_

### Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Last First

Address: \_\_\_\_\_  
Street Address

\_\_\_\_\_ City Postcode

Phone: \_\_\_\_\_ Email \_\_\_\_\_

### Education and Employment

University: \_\_\_\_\_ Course: \_\_\_\_\_

Current year of study: \_\_\_ of \_\_\_ Or graduated?  YES Complete a) and b)

a) Current Role / Grade: \_\_\_\_\_

b) Current Hospital: \_\_\_\_\_

### Why would you like to join the committee?

200 words maximum

### What role do you think the group should serve to students and junior doctors in the UK?

200 words maximum

Please submit this form **and your CV** to [fphc@rcsed.ac.uk](mailto:fphc@rcsed.ac.uk)

We will be in touch as soon as possible.

Thank you.