**Study Leave Application Form**

**for HEE-TV Appointed Junior Doctors in Training**

Effective from 6 April 2018 (version 7: Oct 2019)

**Please complete this form in full. Incomplete forms will be returned to you.**

**A. Personal Details** (please print)

**Surname: First Name**:

**GMC Number: NHS Trust email address:**

**(where correspondence will be sent)**

|  |  |
| --- | --- |
| **Grade (Please circle as appropriate)****• FY1 / FY2** **• CT1 or IMT1 / CT2 or IMT2 / CT3 or IMT3****• ST1 / ST2 / ST3 / ST4 / ST5 / ST6 / ST7 / ST8 / ST9** **• Academic Clinical Fellow / Academic Clinical Lecturer** | **Are you training full time or less than full-time?****• FT****• LTFT @ ……..%** |

**Please tick if you are a GP Trainee:** [ ]  **(see note on page 4)**

**National Insurance or Assignment Number (see below):**

***GP Trainees Only:* You are required to provide your National Insurance or Assignment number. St Helens & Knowsley (GP Lead Employer) have requested this in order to process reimbursement payments. Without this, your claim will not be refunded. Non-GP trainees do not need to provide this information.**

**Please tick if you have an OXF training number, but you are training outside of Thames Valley:** [ ]  **(see note on page 4)**

**Hospital: School: Specialty:**

-------------------------------------------------------------------------------------------------------------------------------------------------------

**B. Details of Study Leave**

**Is this essential\* or desirable\* (\* delete whichever does not apply) for you to attain your curriculum sign off in this training placement?**

You MUST refer tothe specialty specific list of what constitutes essential or ‘desirable/ highly recommended’ study leave for each School. These lists are found on the Oxford Deanery website via the Study Leave page. Please note that the Study Leave budget is a finite sum held at HEE TV, and funding for essential courses must take priority over other requests.

**Purpose of Leave:**

|  |  |
| --- | --- |
| To attend a study day / workshop as a learner | Conference presentation (oral / poster) |
| Speaker  | As part of the training faculty |
| Private study leave for exam preparation | To sit an exam |

**Please provide the name of event or exam for which study leave is requested and explain/justify this application for funding (if the course is on the agreed essential list, then should state this):**

**Dates**: From …. To … Total number of study leave days requested …..

**Place where held:** (No abbreviations)

**Organisers:** (No abbreviations)

**Please state all other Study Leave undertaken during this training year (incl. approximate dates of leave and total costs)**

Example:

|  |  |  |
| --- | --- | --- |
|  Basic surgical skills | March 2018 | £800 |

|  |  |  |
| --- | --- | --- |
| **Event Details** | **Date/s** | **Cost** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

**C. Expenses** (F1s cannot apply for expenses) **If you leave this section blank HEE TV will assume that no funding is required**

NB For applications after Sept 2019 overseas courses: either registration fees **OR** flights & accommodation, not both, will be reimbursed to the value of the lower sum. Please see the full guidance document for more information.

|  |  |  |
| --- | --- | --- |
|  | **Amount £** | **Has this been agreed with HEETV / TPD?** |
| Registration fees |  | Any request for funds in excess of £700 (excluding travel and subsistence) must be sent by the trainee to be reviewed by your TPD for additional enquiry and scrutiny. Please include their confirmation email when submitting this form. |
| Car miles – Total cost @ 28p a mile **MILES**: ………… |  | N/A |
| Car parking |  | N/A |
| Train fare  |  | If travelling on Eurostar, prior permission is required from HEE-TV: studyleave.tv@hee.nhs.uk (please complete this form in full and forward to the above email for approval. Your application form and the subsequent approval email must then be sent to your local Study Leave Officer for their records) |
| Air fare (prior permission not required if within UK)  |  | Eire and Rest of World require prior permission from HEE-TV: studyleave.tv@hee.nhs.uk (please complete this form in full and forward to the above email for approval. Your application form and the subsequent approval email must then be sent to your local Study Leave Officer for their records) |
| Accommodation (up to £150 in central London [City of Westminster or City of London only, and overseas] and £120 elsewhere, preferably less to retain monies for further access to training) |  | Valid London postcodes for higher rate are EC1 and EC4, NW1, NW8, SW3, SW7, WC1, WC2, W1, W2, W9, W10The revised maximum rate is applicable for all accommodation booked for events taking place on or after the 1st June 2019. All accommodation booked for events prior to this will be reimbursed at a maximum of £55 per night. |
| Subsistence allowance for course requiring overnight stay (max £15 per day) |  | HEE will not reimburse subsistence claims for overseas courses |
| **TOTAL COST** |  | N/A |

-------------------------------------------------------------------------------------------------------------------------------------------------------

**D. Signatures and Declarations**

1. **Trainee Signature and Declaration**

□ I have read HEE TV’s study leave policy and declare that all the information given on this form is full and correct.

□ I have completed all my Trust’s statutory and mandatory training (please attach evidence of this)

**Signature: Print Name: Date:**

1. **‘Named Clinical’ or Educational Supervisor Signature and Declaration**

□ I declare that this doctor will be in a training grade post at the time of study leave AND I believe that this educational activity will benefit the doctor to help achieve **successful completion of this stage of their training**.

EITHER: □ This request is to support 'essential' requirements for curriculum attainment for this stage of training.

OR: □ This request would enhance the trainee's development and is an aspiration discussed at the induction meeting with me as part of the PDP.

**Signature: Print Name: Date:**

**Note for trainees** – an email attached to this form from your educational supervisor approving your application for study leave can be accepted in lieu of Section D2 being completed, provided your supervisor has made the above affirmations in this email.

-------------------------------------------------------------------------------------------------------------------------------------------------------

**Please return this form to the trust where you are on payroll: details on next sheet.**

**Retrospective applications will not be accepted. Claims made without having first applied for time/funding will not be accepted. It is your responsibility to ensure the correct teams have received your application in good time, ideally six weeks prior to the event, and a minimum of one week prior.**

**Please remember to book your approved study leave with your rota co-ordinator.**

**Please remember to submit receipts when applying for reimbursement of payments.**

**End of Form**

|  |  |
| --- | --- |
| **Trust** | **Contact Details** |
| Oxford University Hospitals NHS Foundation Trust***Please note****: Psychiatry trainees employed by* ***Oxford Health*** *must send completed study leave forms to the email address shown at the bottom of this table.* | Studyleave.officer@ouh.nhs.ukEducation CentreOxford RdBanburyOX16 9AL<http://www.ouh.nhs.uk/education-centres/study-leave/default.aspx> |
| Berkshire Healthcare Foundation Trust | Jackie.smith@berkshire.nhs.uk  |
| Buckinghamshire NHS Foundation Trust | bht.studyleaveapplications@nhs.net  |
| Central and North West London Foundation Trust | Jo Jenkins - joanna.jenkins2@nhs.netTel:  01908 725282Fax:  01908 694919 |
| Frimley Park NHS Foundation Trust | fhft.studyleave.pgmc@nhs.net |
| Milton Keynes NHS Foundation Trust | nicola.cornish@mkuh.nhs.ukChristine.bishop@mkuh.nhs.uk |
| Royal Berkshire NHS Foundation Trust | MedicalEducationEnquiries@royalberkshire.nhs.uk 0118 322 7831 |
| Oxford Health NHS Foundation Trust *(Psychiatry Trainees only)* | medicalstaffing@oxfordhealth.nhs.uk Tel: 01865 902701 |
| Hertfordshire Partnership University NHS Foundation Trust | hpft.medicaleducation@nhs.net |

|  |
| --- |
| **GP Trainees in a Hospital Post:**Please follow all guidance in the policy, and submit your applications and expense claims to your local Trust based Study Leave Officer as noted above. Expense claims will be reviewed and verified by the Trust, who will then send them to HEE TV to be forwarded to St Helens and Knowsley Teaching Hospitals NHS Trust (StHK) (GP Lead Employer) for payment in your salary. Please note that StHK require your National Insurance or Assignment number in order to process your payment. If you do not provide this, your claim will not be paid.Please do not submit applications or claims directly to StHK.**GP Trainees in a Practice:**Please follow the GP School Study Leave process - <http://www.oxforddeanery.nhs.uk/specialty_schools/school_general_practice/courses.aspx>  |

|  |
| --- |
| **HEETV Trainees working outside of Thames Valley:**Trainees who work in another region but hold an OXF training number are entitled to funds for study budget, but you must use the HEETV application form and get your TPD in HEETV to sign it prior to submitting to your host Trust.Please ensure you have requested leave from the department you are training in as well, and submit receipts using the approved internal processes, to whichever Trust is paying your salary, so that expenses incurred can be reimbursed through payroll. |