**A close up of a logo

Description automatically generated**

**Expression of Interest**

**Trailblazer Fellowships**

**Having read the accompanying information if you wish to apply for a Trailblazer fellowship please complete the following:**

|  |  |
| --- | --- |
|  | |
| **Full Name** |  |
| **Email Address** |  |
| **Contact Number** |  |
| **GMC number** |  |
| **Current employment status:** | * [ ] Current GP ST3 Reg. with job offer * [ ] Currently in GP role   Name of training practice: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name of employing practice: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Employment start date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date of CCT \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Number of clinical sessions per week in GP role are (or will be):** | * No. of sessions: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Main GP Role is (or will be):** | * [ ] Partner * [ ] Salaried * [ ] Portfolio * [ ] Locum * [ ] Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  |
| **Have you spoken to someone at GPTF re the Trailblazer fellowships?** | * [ ] Yes - if so, who? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ * [ ] No |
| **Subject to the recruitment process, when would you like this role to start?** |  |
|  | |
| **Supporting information** *-* please include a short summary of:   1. Details of the Fellowship you intend to undertake, bearing in mind that the focus needs to be on:  * working within the most deprived practice populations or * the care of vulnerable / marginalised groups or * tackling health inequalities  1. The conversations you have had with the practice and how they would support the project 2. Why you are interested in this role (this might include: how this role would retain you as a GP working in Derbyshire, how it would benefit the wider health care system, what you hope to achieve from it to further your career) | |
|  | |
| **Signed:**  **Date:** | |

In conjunction with: 

**Please send completed form to** [**ddlmc.gptf@nhs.net**](mailto:ddlmc.gptf@nhs.net) **and cc to** [**gail.walton@nhs.net**](mailto:gail.walton@nhs.net)

Watch our websites [**https://gptaskforce.com**](https://gptaskforce.com/) and [**https://www.derbyshirelmc.org.uk**](https://www.derbyshirelmc.org.uk)

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