



Document 2 - Course Endorsement Application Form

Only the details of one course should be on this form. The form must be submitted to cpd@rcpsg.ac.uk

Part A - Applicant details	
Name of applicant	
Applicant address	
Tel no.	
Email	
Applicant organisation	
Applicant job title	
Other RCPSG endorsed courses run by the applicant	



Part B - Course focus and rationale	
Course title	
Course need	
Course aim/s	
Level	
Learning outcomes	
Target audience	
Minimum Qualifications required:	
Max. participants	
Faculty/participants i.e. ratio. 1:6	
Participants qualifications checked	
Materials to be used on the course (for skills courses only):	
Course Risk Assessment	
Required Health Standards checked	
Please attach a copy of the course programme, including details of the teaching faculty involved	
Please attach copies of course slides	
Please attach copies of skill/scenario skill station information	



Please attach copy of assessment procedure including marking matrix. Details of the assessment rationale and processes and pass mark.

Please provide details of consequences of poor performance and appeals/resit procedure

Legal considerations. Copyright issues,
patient permission/consent for any
photographs and patient stories

Proposed venue facilities:

Access, parking, catering & accommodation

Sponsors



Part C - Course outcome (to be completed and sent after the course)

Please attach a copy of the course programme

Proposed how changes to be implemented following evaluation

Signed.....

Date.....

Part D - Official use

This person is responsible for the clinical governance of the course. They will be accountable for quality assurance, including the quality of the faculty, the teaching and assessment.

Signed.....

Date.....