

Anaesthesia CORE TRAINING Summary- PLEASE INCLUDE MONTHS as well as years

	Date this training year commenced (month and year)	% of FT training for this year	Complete training years. Date this training year was complete.	Incomplete training years. Number of months (full-time equivalent) completed of this training year*	Hospital where the training took place
CT1					
CT2					
CT3					
CT3+					

*e.g. I have completed 10 calendar months at 0.6% since beginning ST5. I should enter the full-time equivalent of months I have completed. $10 \times 0.6 = 6$ months (I am half way through ST5).

time out of training summary

Period of time out of training (DD/MM/YY- DD/MM/YY)	Reason for absence e.g. sick leave, maternity leave etc..
