

CONJOINT COMMITTEE FOR RECOGNITION OF TRAINING IN GASTROINTESTINAL ENDOSCOPY

CHECKLIST

APPLICANT

Please note only original forms are accepted.

Have you:

Filled in the relevant details on the application form showing your personal details and the procedures you are applying for?	<input type="checkbox"/>
Included your logbook?	<input type="checkbox"/>
Completed the required number of procedures?	<input type="checkbox"/>
Included failed as well as successful attempts?	<input type="checkbox"/>
Filled in the summary sheets and added the number of procedures?	<input type="checkbox"/>
Included documentation relating to your understanding of cleaning and disinfection?	<input type="checkbox"/>
Included the application fee for each procedure applied for. Please check with the Conjoint Committee office to verify the current fees – phone 04 460 8121 or email claire.lovewell@racp.org.nz	<input type="checkbox"/>

SUPERVISOR

Are you recognised by the Conjoint Committee for the relevant procedure?	<input type="checkbox"/>
Has each procedure in the logbook been individually initialed?	<input type="checkbox"/>
Have you provided a written report?	<input type="checkbox"/>

Please note that it is the responsibility of the applicant to ensure that the registration and application forms are complete and submitted by the closing date. Submission of incomplete forms or non-payment of the relevant fees will result in the application not being assessed.