## UNDERGRADUATE MEDICAL STUDENT ELECTIVE EXPRESSION OF INTEREST



For official	Ref No	Date
use only:		Received

### PLEASE WRITE CLEARLY AND ENSURE YOU COMPLETE ALL SECTIONS IN BLOCK CAPITALS

### SECTION 1: PERSONAL DETAILS (THESE DETAILS MUST BE AS PER PASSPORT)

Surname				Forename(s)				
Email address								
Sex (M / F)	)			Nationality				
Date of Birth				Country of Birth	1			
Please tick the appropriate box:		UK/EU/EAA National		Non-EU National, with Refugee Status or Exceptional Leave to Remain		None of these		
					<i>(</i> .).			

I declare that **\*I require / I do not require** a VISA to enter the United Kingdom to study. (**\* delete as appropriate**). You require a VISA if you do not hold a passport from the UK, or the EU, or the European Economic Area.

If you require a Visa to enter the UK or are currently subject to Visa restrictions please detail your current immigration status including start date and expiry date of your current visa:

If not British or EEA National, date of most recent entry to the UK:

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SECTION 3: ABOUT YOUR ELECTIVE (minimum notice of 12 weeks is required)								
Year of study at time of proposed elective (4 <sup>th</sup> , 5 <sup>th</sup> , etc)								
Are you applying to other UK medical schools for a placement?								
	Hospital		Specialty		Intended start date (DD/MM/YY)	Intended end date (DD/MM/YY)		
First Choice								
Second Choice								
Third Choice								
If an informal approach has already been made to a clinician to supervise you, please provide details (minimum notice of 12 weeks is still required)								
Supervisor's name								
Hospital and Spe	cialty							
Email address								
Date informal approach made		•	Date	Date clinician first responded				

Please return your completed enquiry form to - '0: <u>nhsh.electiveplacements@nhs.scot</u>

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The information provided will be used to establish whether a placement is possible. If there is availability you will then be sent an application form to allow your application to be processed.

# LIST OF HOSPITALS AND SPECIALTIES

### **BELFORD HOSPITAL,**

Belford Hospital, Fort William, PH33 6BS

Rural general hospital elective: Accident & Emergency Anaesthesia General Medicine General Surgery

CAITHNESS GENERAL HOSPITAL

Bankhead Road, Wick, KW1 5NS

### BROADFORD HOSPITAL / BROADFORD HOSPITAL

High Road, Broadford, Isle of Skye, IV49 9AA

# LORN AND ISLANDS HOSPITAL

Glengallan Road, Oban, Argyll, PA34 4HH

NEW CRAIGS HOSPITAL

Leachkin Road, Inverness, IV3 8NP

### **RAIGMORE HOSPITAL**

Old Perth Road, Inverness, IV2 3UJ

Rural general hospital elective: Accident & Emergency Anaesthesia General Medicine General Surgery Obstetrics & Gynaecology

*Rural community elective:* General Practice referrals Inpatients Ambulance cases and walk-in patients Out of hours emergencies

Rural general hospital elective: Accident & Emergency Medical Surgical Care of the Elderly

Psychiatry

District general hospital elective: Anaesthesia Cardiology Diabetes & Endocrinology **Emergency Medicine** Gastroenterology Haematology Infectious Diseases Medicine (Acute/General) Medicine for the Elderly Neurology **Obstetrics & Gynaecology** Oncology Orthopaedic Surgery Paediatrics Radiology Renal Medicine Rheumatology Surgery (General)