**Oxford Academic Psychiatry Autumn School 2018**

**Application form**

**Previous attendance**

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| Please note that, if you have previously attended, you may not attend again. Sorry.  |

**First, a little background …**

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| **Your full name** | Click here to enter text. |
| **Title** | Choose an item. |
| **Email address**  | We will use email as the main means of communicating with you. Please use an email address that will operate reliably until the end of September 2016.Click here to enter text. |
| **Mobile phone number** | Click here to enter text. |
| **Your status** (at September 1st 2016)  | Choose an item.If ‘other’, please state your status: Click here to enter text. |
| **Your medical school** (current or past) | Click here to enter text. |
|  **Your employer/hospital** (if you have qualified) | Click here to enter text. |
| **Dates at medical school** (start year / end year) | Click here to enter text. |
| **Degrees to date** (if any) | Click here to enter text. |
| **Research experience and publications to date** (if any) | Click here to enter text. |
| **Relevant clinical experience to date** (if any) | Click here to enter text. |

**You and the Autumn School**

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| Please tell us about your experiences of and thoughts about psychiatry to date  | Up to 200 wordsClick here to enter text. |
| Please tell us about your experiences of and thoughts about an academic career to date  | Up to 200 wordsClick here to enter text. |
| Why do you want to attend the Oxford Psychiatry Autumn School? | Up to 200 wordsClick here to enter text. |
| What are your current career intentions?  | You may well not have a clear idea of what you want to do, and where you want to do it – but please summarise your thoughts, intentions and questions at this time. Up to 200 words. Click here to enter text. |

**And finally …**

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| I understand that:1. There is no charge for the Autumn School
2. However, if I am offered a place and wish to accept, I will need to provide a £50 attendance deposit. This deposit will be refunded when I attend the School. Alternatively, if I cannot attend, and inform the organisers before September 1st, the deposit will be refunded.
 | Choose an item. |
| The information provided here is accurate and truthful.   | Choose an item. |

**Please now:**

1. **Save this document as ‘your last name - your first name’ (eg price-jonathan), and**
2. **Email it to autumnschool@psych.ox.ac.uk**