**Family Medicine Academic Scholars’ Programme (Junior Adjunct Faculty Scheme) - Application Form**

**INSTRUCTIONS TO APPLICANTS**

* Complete this application form. Incomplete applications will not be considered.
* Other documents to be submitted are:
	+ A photocopy of your MMED (Family Medicine) graduation scroll or certification
	+ A copy of your curriculum vitae (CV)
* Send this application form, your MMED graduation scroll and CV to Ms. Leong Foon Leng at mdcv381@partner.nus.edu.sg by **31 January 2023, 9am**.

 **COMPLETE PARTS A TO C.**

**Part A. Applicant Details**

|  |  |  |
| --- | --- | --- |
| Name | : |  |
| MCR Number | : |  |
| Home Address | : |  |
| Contact Number | : |  |
| Email | : |  |
| Current Employer | : |  |
| Current Practice Status (Tick the correct box) | : | * Full-time
* Part-time*State no. of paid working hours per week:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*
* Any anticipated leave over next yearState the start and end dates:*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* |
| Practice Details |  |  |
| Name | : |  |
| Address | : |  |
| Proposed Start Date for Academic Post | : |  |

**Higher Education**

Are you currently enrolled in a university subject or degree or any other postgraduate programme? (Tick the correct box)

* Yes
* No

If yes, please elaborate on the name of the subject, degree or programme and the project date of completion:

Are you planning to enrol in a university subject or degree? (Tick the correct box)

* Yes
* No

If yes, please elaborate on the name of the subject, degree or programme:

**Part B. Academic Scholars Programme Learning Objectives for Research***Outline your learning objectives, describing what you hope to achieve, and the skills you hope to develop during the programme in the areas of research.* **Part C: Declarations**
I hereby declare that the information provided by myself for this application is true to the best of my knowledge.

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Name/Signature of applicant Date