



# FACULTY OF PAIN MEDICINE

of the Royal College of Anaesthetists

## Application for Faculty of Pain Medicine Resident Doctor Representative

**Name (in full):**

**Region of Application:**

**Contact Email:**

**College Reference Number:**

**GMC Registration Number:**

**Statement:** (250 words maximum)

*Please explain why you have applied for the post and highlight the ways in which you match the person specification.*

**Is there any current restriction or qualification on your registration (with the GMC) to practise medicine within the UK?**

YES ☐ NO ☐

If the answer to this question is 'YES', kindly provide details below; the matter will be considered by the Dean or Vice-Dean.

*Please include a short version of your curriculum vitae.*

### **Data Protection Statement**

The Royal College of Anaesthetists (RCoA) is fully committed to the principles of data protection, as set out in the Data Protection Act 2018 (C.12). The RCoA relies on legitimate interests as the lawful basis for processing of personal data. We process and maintain personal data about you so that we can manage your membership, provide you with appropriate products and services and share information with you about RCoA activities. We will only use your information for the purposes as described and will not pass on your details to other third parties unless you have given us consent to do so.

We use appropriate organisational and technical measures to ensure that your data are secure and protected from loss, misuse and unauthorised access or alteration. You have the right to ask for a copy of the information we hold about you and to have any inaccuracies in your information corrected. If you have any questions about data protection or require further information, please email [dpo@rcoa.ac.uk](mailto:dpo@rcoa.ac.uk)