**www.rcp.ac.uk**

Application for the role of
RCP regional adviser

RCP regional advisers are a crucial part of the RCP structure. They are the link between physicians in regions, the RCP Council and senior officers. To be eligible, applicants must be current subscribing RCP fellows (rather than fellows of another royal college).

The role requires engagement with local physicians and carrying out specific duties that maintain the quality of local services and encourage a vibrant network of physicians. This involves supporting college tutors and associate college tutors, approving consultant job descriptions, reviewing fellowship nominations, and working with the RCP regional team to create a programme of events including ‘Update in medicine’ conferences, visits to local hospitals, and meetings with regional representatives.

The full job description can be viewed at <https://www.rcp.ac.uk/about-us/whos-who/regional-advisers>

## Application for RCP regional adviser vacancy

|  |  |
| --- | --- |
| **Name** |  |
| **Email** |  |
| **RCP number** |  |
| **Hospital** |   |
| **Specialty** |  |
| **Region** |  |

The RCP supports job sharing for the role of regional adviser. If you wish your application to be considered for job share, you must complete the details below. Please note, both applicants must be current fellows of the RCP and should both submit application forms to be considered.

|  |  |
| --- | --- |
| **I wish my application to be considered for job share** |  |
| **Name of joint applicant** |  |
| **RCP number of joint applicant** |  |
| **Hospital** |  |

Please list any roles held locally (specialist society, training programme director etc) with dates

|  |  |
| --- | --- |
| **Role** | **Dates (to/from)** |
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Please give details of your experience relevant to the role (maximum 200 words)

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Please give a short statement (maximum 200 words) outlining why you would like to be considered for the role.

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|   |

Please give the names of two RCP fellows from within the region who support your nomination

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| --- | --- | --- |
| **Name** | **Hospital** | **Email** |
|  |  |  |
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**Please return this form to your RCP regional manager together with a copy of your up-to-date CV – maximum 2 pages. Please note, this is essential for your application to be considered by the
RCP Nomination Committee.**

## Equality and diversity information

(if you do not wish to provide this information please state ‘prefer not to say’)

|  |  |
| --- | --- |
| How did you hear about this vacancy? |  |
| Which gender do you identify with?  |  |
| How would you describe your ethnicity? | Asian/Asian British: Chinese |  |
|  | Asian/Asian British: Bangladeshi |  |
|  | Asian/Asian British: Indian |  |
|  | Asian/Asian British: Pakistani |  |
|  | Asian/Asian British: Sri Lankan |  |
|  | Asian/Asian British: Other |  |
|  | Asian/Asian British: Other |  |
|  | Black/Black British: African |  |
|  | Black/Black British: Caribbean |  |
|  | Black/Black British: Other |  |
|  | Mixed: Other |  |
|  | Mixed: White and Asian |  |
|  | Mixed: White and Black African |  |
|  | Other: Arab |  |
|  | Mixed: Middle Eastern (other) |  |
|  | Other: Other |  |
|  | White: English /Welsh /Scottish/ Northern Irish |  |
|  | White: Irish |  |
|  | White: Gypsy or Irish Traveller |  |
| Do you consider yourself to have a disability? | Document title |

***To be completed by RCP regional manager***

|  |  |
| --- | --- |
| Date application received |  |
| Confirm eligible to stand |  |
| Region |  |

title