Name of trainee: ______________________________________________________________________________________________

Department / Hospital: ____________________________________________________________________________________________

Date of Entry into Higher Training Programme: __________________________________________________________________________

Training Period: From ____________________________ to ____________________________
(dd/mm/yy) (dd/mm/yy)

Description of Activities (to be completed by the trainee):

Clinical (Special General Paediatrics or Subspecialty):

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Supervisory:

________________________________________________________________________

Teaching:

________________________________________________________________________

Administrative:

________________________________________________________________________

Academic and scientific:

________________________________________________________________________

Research:

________________________________________________________________________

I hereby declare that the information submitted is accurate. I give my consent to the College writing directly to my supervisors and training authorities to obtain any other relevant information.

Trainee: ____________________________ (Name) ____________________________ (Signature) ____________________________ (Date)

Confirmation of Log Sheets (to be completed by trainer):

I hereby verify that the above information is accurate.

Trainer: ____________________________ (Name) ____________________________ (Signature) ____________________________ (Date)

(This form should be completed every six months or each rotation by the trainee and signed by the trainer. These log sheets should be returned to the Hong Kong College of Paediatricians when the trainee applies for exit assessment by the College.)