

HONG KONG COLLEGE OF PAEDIATRICIANS

Paediatric Haematology & Oncology

Log-sheet for Training Activities

Name of trainee: \_\_\_\_\_

Rotation#: LLH / STNO / BMT / General Haem / Elective (Pls specify \_\_\_\_\_)

Duration: \_\_\_\_\_ months

Start Date: \_\_\_\_\_ (dd/mm/yy) End Date: \_\_\_\_\_ (dd/mm/yy)

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

**Clinical**

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**Supervisory**

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**Teaching**

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**Administrative**

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**Academic**

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**Research**

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*# delete as appropriate.*

*Please attach additional sheets if needed*

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Paediatric Haematology & Oncology  
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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 progress summary** (to be completed by trainer):

I hereby verify that the above information is accurate.

Trainer: \_\_\_\_\_  
(Name) (Signature) (Date)

Notes:

(This form should be signed every 3 months or at the end of a rotation, whichever is earlier. A copy should be sent to the Programme Director. The original form should be kept by the trainee and will be submitted to Hong Kong College of Paediatricians when the trainee applies for Exit assessment.)