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## THE ROYAL COLLEGE OF PATHOLOGISTS

Examinations Department  
4<sup>th</sup> Floor, 21 Prescot Street  
London  
E1 8BB

Tel: 020 7451 6745

### Part 2 written project application form

### Dissertation / casebook / PhD / MD thesis / published papers

*A proposal for your written project must have been **approved** by the College before submission of the finished project and this application form.*

*Please also note that the Part 2 project **must** be submitted to the College at least **four months** before the closing date of the Part 2 examination session for which the candidate wishes to enter in specialties where this remains applicable.*

***You must read the Regulations and Guidelines for College Examinations and the relevant specialty section before completing this form.***

### SECTION A – TO BE COMPLETED BY THE CANDIDATE

Title (Dr, Prof, Mr, Mrs, etc.) .....

Surname (block capitals) .....

Forenames .....

Work address .....

.....

..... Postcode .....

Current position .....

Preferred telephone number (work/home/mobile – delete as applicable) .....

Preferred e-mail address .....

I passed the Part 1 examination in (session) .....

I wish to submit (please tick as appropriate):

- ☐ a dissertation
- ☐ a casebook
- ☐ a PhD/MD thesis
- ☐ published papers.

Specialty .....

Number of words (dissertation or casebook only) .....

*(A dissertation should be between 4000 and 6000 words long, and a casebook between 10 000 and 20 000 words long, excluding bibliography and references – see the relevant specialty regulations for more details)*

I intend to sit the Part 2 examination in: .....

or

I passed the Part 2 examination in: .....

**The appropriate application form and fee for the Part 2 examination *must* be submitted to the College before the relevant closing date. Please note that can be done before the project is approved (but your entry will remain provisional until it is approved)**

**Declaration** *(Please tick each box below and sign and date the application form)*

- ☐ I enclose a current CV.
- ☐ I have read and agree to abide by the Regulations & Guidelines for the College Examinations for Fellowship.
- ☐ I agree, in the event of my admission to Fellowship, to obey the College regulations and to further to the best of my ability its objects and interest.
- ☐ I am aware that my name and the title of my dissertation may be published on the College's website (**not applicable** for theses, casebooks or published papers).

**Signature** ..... **Date** .....

## SECTION B – TO BE COMPLETED BY THE SPONSOR

Sponsors are requested to comment on the candidate's contribution to written options and, where published papers are submitted, multi-author works and his or her field(s) of study.

Space is provided below for this purpose.

More lengthy reports may be attached to the back of the form.

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**Candidate's name** ..... **Date**.....

I hereby recommend ..... 's written project to be considered by the College. I confirm that I have read the Regulations and Guidelines for the College Examinations for Fellowship and to the best of my knowledge and belief he/she has fulfilled the requirements for submission of the written project and that the details given on the application form are correct.

Sponsor's signature .....

Sponsor's name: .....

Address: .....

.....

Appointment: .....

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Sponsors should be Fellows of the College. In certain circumstances, and where such sponsorship is impracticable, the sponsor should be the head of department in which the applicant holds his or her present appointment.

## ETHNIC MONITORING FORM

The Royal College of Pathologists wishes to promote equal opportunities in employment. Our aim is to ensure that applicants for employment are not discriminated against on the grounds of gender, age, disability, marital status, race, religion or sexual orientation. In order to monitor these aims, we would be very grateful if you would complete and return this form with your application. The information will be treated as strictly confidential and is subject to the provisions of the Data Protection Act 1998. It will not be used at any stage of the selection process.

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**Gender (please tick):**      Male ☐      Female ☐      **Date of birth**.....

**1. Disability**

*If you are disabled, please give details*.....

**2. Nationality**

Please specify your nationality as shown in your passport.....

**3. Country of origin**

Please choose one section from A to E and tick the appropriate box to indicate your ethnic group.

**A. White**

- ☐ English/Welsh/Scottish/Northern Irish/British
- ☐ Irish
- ☐ Gypsy or Irish Traveller
- ☐ Any other White background, write in \_\_\_\_\_

**B. Mixed/multiple ethnic groups**

- ☐ White and black Caribbean
- ☐ White and black African
- ☐ White and Asian
- ☐ Any other Mixed/multiple ethnic group, write in \_\_\_\_\_

**C. Asian/Asian British**

- ☐ Indian
- ☐ Pakistani
- ☐ Bangladeshi
- ☐ Chinese
- ☐ Any other Asian background, write in \_\_\_\_\_

**D. Black/African/Caribbean/Black British**

- ☐ African
- ☐ Caribbean
- ☐ Any other Black/African/Caribbean background, write in \_\_\_\_\_

**E. Other ethnic group**

- ☐ Arab
- ☐ Any other ethnic group, write in \_\_\_\_\_