## Out of Programme Request and Annual Review Document OOPT / OOPE / OOPR / OOPC

**For new requests**, this document should be sent to the Postgraduate Dental Dean/Director (PGDD) only after it has been signed by the trainee's educational supervisor and Training Programme Director (TPD). The PGDD will use this if advice is needed from the individual Specialist Advisory Committee (SAC).

**For annual review and renewal**, this document should be signed by the trainee and TPD and will need to be submitted to the Annual Review of Competence Progression (ARCP) panel.

Name	NTN			
<b>Contact Address</b> for duration of OOP if granted				
E-mail address				
Specialty		TPD		
Current year of training		Provisional CCST date		
Please indicate if you are requesting time out of programme for:- New request   (✓)				Ongoing OOP (✓)
Prospectively deanery approved clinical training (OOPT)				
Clinical experience <i>not</i> prospectively approved for training (OOPE)				
Research for a registered degree (OOPR)				
Career break (OOPC)				
Have you discussed your plans to take time out of programme / continue your time out with your education supervisor and / or Training Programme Director?			Yes	No
How long would you intend to take time out /still remain on your OOP?				
What will be your provisional date for completing training if you take/continue with this time out of programme?				
If your request for time out of programme is agreed, you will be required to give your TPD and current/next employer 3 months' notice of leaving the programme. Please state the date you wish to start your out of programme experience (which must take account of the 3 month notice period)				
Date you plan to go out of the clinical programme				
Date you plan to return to the clinical programme				

Attach a brief description of what will be done during time out of programme and where it will take place (not required for on-going OOP). You should also provide the additional following information:-

- OOPT attach details of your proposed training for which prospective deanery approval will be required if the training does not already have deanery approval (e.g. if it is part of a recognised training programme in a different deanery it will already be recognised training). For ongoing OOP this document should accompany the assessment documentation for ARCP
- OOPE describe the clinical experience you are planning to undertake (e.g. overseas posting with a voluntary organisation). For ongoing OOP, a short report from your supervisor confirming that you are still undertaking clinical experience should accompany this for ARCP
- OOPR attach your outline research proposal to this document and include the name/location of your research supervisor. For ongoing OOP, a report from the research supervisor needs to be attached to this document for ARCP

 OOPC – please give a brief outline of your reasons for requesting a career break whilst retaining your training number

I am requesting approval from the PGDD to undertake the time out of programme described above/continue on my current OOP whilst retaining my training number. I understand that:

- a) Three years out of my clinical training programme will normally be the maximum time allowed out of programme. Extensions to this will only be allowed in exceptional circumstances that will need further written approval from the PGDD.
- b) I will need to liaise closely with my TPD so that my re-entry into the clinical programme can be facilitated. I am aware that at least six months' notice must be given of the date that I intend to return to the clinical programme and that the placement will depend on availability at that time. I understand that I may have to wait for a placement.
- c) I will need to return an annual out of programme report for each year that I am out of programme for consideration by the annual review panel. This will need to be accompanied by an assessment report of my progress in my research or clinical placement. Failure to do this could result in the loss of my training number.
- d) I will need to give at least 3 months' notice to the PGDD and to my employer before my time out of programme can commence.

Trainee signature	Trainee name (printed)	Date
Educational supervisor signature	Educational supervisor name (printed)	Date
TPD signature	TPD name (printed)	Date
Approval by PGDD		
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Signed	Date	