**DIPLOMA IN HUMAN PHARMACOLOGY**

**Curriculum Vitae Template**

Complete this form and email a copy to [exams@fpm.org.uk](mailto:exams@fpm.org.uk) or post to the address above.

You may add or remove boxes as relevant to your experience.

**PERSONAL DETAILS**

|  |  |  |  |
| --- | --- | --- | --- |
| Title | First name | | Surname |
| Address for correspondence | |  | |
| Phone number | |  | |
| Email | |  | |
| FPM membership No. (if applicable) | |  | |
| Date of birth (dd mm yy) | |  | |

**MEDICAL REGISTRATION**

|  |  |  |  |
| --- | --- | --- | --- |
| GMC (UK) | No. | Date: | |
| Medical Reg. (non-UK) | No. | Date: | Country: |

**ACADEMIC RECORD**

|  |  |  |  |
| --- | --- | --- | --- |
| From mm/yy | To mm/yy | Qualification | Institution / Awarding Body |
|  |  |  |  |
|  |  |  |  |
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**PROFESSIONAL AFFILIATIONS/MEMBERSHIP OF LEARNED SOCIETIES (if relevant)**

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**DETAILS OF EXPERIENCE IN HUMAN PHARMACOLOGY / TRANSLATIONAL MEDICINE** e.g. time spent and types of studies in which you have been actively involved ***and in what capacity***

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**EMPLOYMENT HISTORY**

NB: You must state periods of absence e.g. sickness, parental leave longer than one month.

**PHARMACEUTICAL**

**Present or most recent**

|  |  |  |
| --- | --- | --- |
| Company / Institution: | | Address of company / institution: |
| From (mm/yy): | To (mm/yy): |
| Job Title: | | Postcode: |
| Responsibilities: | | |

**Previous**

|  |  |  |
| --- | --- | --- |
| Company / Institution: | | Address of company / institution: |
| From (mm/yy): | To (mm/yy): |
| Job Title: | | Postcode: |
| Responsibilities: | | |

**Previous**

|  |  |  |
| --- | --- | --- |
| Company / Institution: | | Address of company / institution: |
| From (mm/yy): | To (mm/yy): |
| Job Title: | | Postcode: |
| Responsibilities: | | |

**Previous**

|  |  |  |
| --- | --- | --- |
| Company / Institution: | | Address of company / institution: |
| From (mm/yy): | To (mm/yy): |
| Job Title: | | Postcode: |
| Responsibilities: | | |

**CLINICAL**

**Present or most recent**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| From mm/yy | To  mm/yy | Institution | | Job title | Full time or Sessions/wk |
|  |  |  | |  |  |
| Supervisors e.g. Consultants | | |  | | |
| Continuing Care | | |  | | |
| Emergency take & frequency | | |  | | |
| Specific procedures learned | | |  | | |
| Outpatient / Specialty Clinics | | |  | | |
| Experience of prescribing | | |  | | |

**Previous**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| From mm/yy | To  mm/yy | Institution | | Job title | Full time or Sessions/wk |
|  |  |  | |  |  |
| Supervisors e.g. Consultants | | |  | | |
| Continuing Care | | |  | | |
| Emergency take & frequency | | |  | | |
| Specific procedures learned | | |  | | |
| Outpatient / Specialty Clinics | | |  | | |
| Experience of prescribing | | |  | | |

**Previous**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| From mm/yy | To  mm/yy | Institution | | Job title | Full time or Sessions/wk |
|  |  |  | |  |  |
| Supervisors e.g. Consultants | | |  | | |
| Continuing Care | | |  | | |
| Emergency take & frequency | | |  | | |
| Specific procedures learned | | |  | | |
| Outpatient / Specialty Clinics | | |  | | |
| Experience of prescribing | | |  | | |

**Previous**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| From mm/yy | To  mm/yy | Institution | | Job title | Full time or Sessions/wk |
|  |  |  | |  |  |
| Supervisors e.g. Consultants | | |  | | |
| Continuing Care | | |  | | |
| Emergency take & frequency | | |  | | |
| Specific procedures learned | | |  | | |
| Outpatient / Specialty Clinics | | |  | | |
| Experience of prescribing | | |  | | |

**Previous**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| From mm/yy | To  mm/yy | Institution | | Job title | Full time or Sessions/wk |
|  |  |  | |  |  |
| Supervisors e.g. Consultants | | |  | | |
| Continuing Care | | |  | | |
| Emergency take & frequency | | |  | | |
| Specific procedures learned | | |  | | |
| Outpatient / Specialty Clinics | | |  | | |
| Experience of prescribing | | |  | | |

**Additional / Non-training posts (if relevant)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| From mm/yy | To  mm/yy | Institution | Job title | Full time or Sessions/wk |
|  |  |  |  |  |
| **Responsibilities:** | | | | |

**TEACHING EXPERIENCE (if relevant)**

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**PUBLICATIONS (if relevant)**

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**OTHER INFORMATION (if relevant)**

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