Mandatory Teaching Log

Foundation doctor

First name:*
Last name:*
GMC Number:*
Training period
Training period to:*
Date completed:*

Teaching Details

Title:*
Date of teaching:*

Teaching type:*
○ Core
○ Non-core

Teaching Setting:*
○ Seminar/tutorial/small group teaching
○ Grand round
○ Balint group
○ Schwartz round
○ Simulation
○ E-learning
○ Other

If Other (please specify)*:

Number of hours:* Round to the nearest half hour.
Do not include lunch breaks/networking etc.

Notes:
Optional, to record any brief details you haven't already recorded elsewhere.

Uploads are optional and it is not required to upload evidence of attendance.

Upload additional evidence

Attachment(s)

Details