



## **KWAZULU-NATAL PROVINCE**

**HEALTH**  
REPUBLIC OF SOUTH AFRICA

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## **DIRECTORATE: HR PLANNING**

**HUMAN RESOURCE MANAGEMENT SERVICES**

**Enquiries: Mrs. R Erasmus**  
**Reference: HRM 7/2/1**

### **TO HEADS OF ALL INSTITUTIONS IN THE KZN PROVINCIAL ADMINISTRATION**

### **REGISTRAR TRAINING POSTS IN THE DEPARTMENT OF HEALTH AND THE UNIVERSITY OF KWAZULU-NATAL: MEDICAL AND DENTAL (VARIOUS DISCIPLINES)**

#### **CIRCULAR MINUTE REG.01/2026**

The contents of this Circular Minute must be brought to the notice of all eligible employees on the establishment of all Institutions. Institutions must ensure that all employees who meet the requirements of the post/s are made aware of this circular minute even if they are absent from their normal places of work.

#### **DIRECTIONS TO CANDIDATES: -**

1. The following documents must be submitted:
  - a) Applicants must ensure that they fully complete the most recent Application for Employment Form (Form Z83) as issued by the Minister for DPSSA (gazetted on 06 November 2020 - 81/971431 effective 01 January 2021) in line with regulation of 10 of the Public Service Regulations, 2016. The Z83 should be accompanied by a recently updated, comprehensive CV on the information template provided to ensure the fair consideration of suitably qualified applicants and which is obtainable from the website - [www.kznhealth.gov.za](http://www.kznhealth.gov.za). Incomplete or unsigned applications will not be considered.
  - b) If you are currently in service, please indicate your PERSAL number at the top of the Z83.
  - c) Applications submitted through the online platforms must include copies of the documents listed above.
  - d) Copies of Qualifications, Registration Certificates and drivers license must not be submitted when applying for employment. Only shortlisted candidates will be requested to submit certified copies on or before the day of the interview. Copies of certified copies will not be accepted, and submission of such documents will render the applicant being disqualified.
  - e) The post reference number must be indicated in the column provided on the form Z.83.
  - f) Please note that proof of successful completion of the required examinations as indicated, is a pre-requisite and must be submitted if invited to an interview.
  - g) The interview process will consist of technical and practical assessment aspects as well as an Ethical Assessment as part of the recruitment process. An assessment of competences will also be done as part of the selection process. This may include verification of qualifications, experience, reference checks etc. In addition to interview performance, selection will be based on multiple parameters.
  - h) Should you be in possession of a foreign qualification, it must be accompanied by an evaluation certificate from the South African Qualifications Authority (SAQA). Applicants who do not comply with the above-mentioned requirements, as well as applications received late, will not be considered.

- i) Appointments are subject to positive outcomes obtained from the State Security Agency (SSA) to the following checks (security clearance (vetting), criminal clearance, credit records, and citizenship), verification of Educational Qualifications by SAQA, verification of previous experience from Employers and verification from the Company Intellectual Property Commission (CIPC).
- j) Appointments are subject to the signing of a contract which includes a service pay-back period.
- k) Persons with disabilities should feel free to apply for the post/s.
- l) Please note that due to the large number of applications received, applications will not be acknowledged. If you have not been contacted within three months of the closing date of this advertisement, please accept that your application was unsuccessful.
- m) Whilst applications are invited for the above disciplines, not all may be filled. Applicants will be advised in due course, should a discipline which has been applied for be excluded from this process.
- n) Applications from applicants who are already appointed in the Registrar Programme will not be considered.
- o) Persons with disabilities should feel free to apply for the post.

2. Applications can also be submitted through the online e-Recruitment system at [www.kznonline.gov.za/kznjobs](http://www.kznonline.gov.za/kznjobs) or directly to the following email address [Registrar.Applications@kznhealth.gov.za](mailto:Registrar.Applications@kznhealth.gov.za)

- a) Applications submitted through the online platforms must include copies of all documents listed in Section 1.a. above. Original certified copies of qualifications and other relevant documents will be requested from shortlisted candidates which must be submitted on the day of the interview.

**NB:** (a) Failure to comply with the above instructions shall result in the applicant being disqualified.  
 (b) The appointments are subject to positive outcomes obtained from the State Security Agency (SSA) to the following checks (security clearance (vetting), criminal clearance, credit records, and citizenship), verification of Educational Qualifications by SAQA, verification of previous experience from Employers and verification from the Company Intellectual Property Commission (CIPC).

***PLEASE NOTE THAT DUE TO FINANCIAL CONSTRAINTS, NO S&T WILL BE CONSIDERED FOR THE ATTENDANCE OF INTERVIEWS NOR WILL RESETTLEMENT ALLOWANCE BE CONSIDERED FOR RELOCATION PURPOSES.***

The Department is an equal opportunity affirmative action employer and to this end, has developed an Employment Equity Plan pursuant to the Employment Equity Act. Preference for the filling of these posts will be guided by the Departmental Equity Plan and targets for the occupational level concerned.

Applicants are discouraged from sending applications through registered mail as the Department will not be responsible for non-collection of these applications.

**CLOSING DATE FOR APPLICATIONS IS 22 AUGUST 2025.  
 NO LATE APPLICATIONS WILL BE ACCEPTED.**

**HEAD OF DEPARTMENT  
 KWAZULU-NATAL**

DATE:  \_\_\_\_\_

**KWAZULU-NATAL PROVINCE**HEALTH  
REPUBLIC OF SOUTH AFRICA**POST : REGISTRAR (MEDICAL) AND DENTAL (VARIOUS DISCIPLINES)**

| <u>DISCIPLINE</u>                              | <u>REFERENCE NUMBER</u> | <u>DISCIPLINE ENQUIRIES</u>      |
|--|-------------------------|----------------------------------|
| ANAESTHESIOLOGY, PAIN MEDICINE & CRITICAL CARE | REG.01/2026             | PROF D. GOPALAN: 031-260-4472    |
| DERMATOLOGY                                    | REG.02/2026             | PROF N. DLOVA: 031-260-4531      |
| EMERGENCY MEDICINE                             | REG.03/2026             | DR S. GARACH: 031-260-4531       |
| INTERNAL MEDICINE                              | REG.04/2026             | PROF N. MAGULA: 031-260-4242     |
| NEUROLOGY                                      | REG.05/2026             | PROF VB PATEL: 031 420 2359      |
| NEUROSURGERY                                   | REG.06/2026             | DR. B. ENICKER: 031-240-1134     |
| NUCLEAR MEDICINE                               | REG. 07/2026            | PROF M VORSTER: 031 260 4301     |
| OBSTETRICS & GYNAECOLOGY                       | REG.08/2026             | PROF M. SEBITLOANE: 031 260 4390 |
| ONCOLOGY                                       | REG.09/2026             | DR STOPFORTH: 031 260 8959       |
| OPHTHALMOLOGY                                  | REG.10/2026             | DR. N. MATHE: 031-260-4341       |
| ORTHOPAEDICS                                   | REG.11/2026             | DR P MTHETHWA: 031 260 4297      |
| OTORHINOLARYNGOLOGY (ENT)                      | REG.12/2026             | DR A SIBIYA: 031 260 4292        |
| PAEDIATRICS & CHILD HEALTH                     | REG.13/2026             | DR L MUBAIWA: 031-260-4345       |
| PAEDIATRIC SURGERY                             | REG.14/2026             | DR M. SHEIK-GAFOOR: 031-240-1579 |
| PATHOLOGY (FORENSIC MED)                       | REG.14/2026             | PROF MFOLOZI: 031 260 2580       |
| PLASTIC SURGERY                                | REG.16/2026             | PROF M DAYA: 031 240 1171        |
| PSYCHIATRY                                     | REG.17/2026             | PROF B. CHILIZA: 031-260-4321    |
| PUBLIC HEALTH MEDICINE                         | REG.18/2026             | PROF S NAIDOO: 031 260 4383      |
| RADIOLOGY                                      | REG.19/2026             | DR N DLAMINI: 031 240 2295       |
| ORAL MEDICINE AND PERIODONTOLOGY (DENTAL)      | REG.20/2026             | DR N DAKI: 033 395 2821          |

**SUCCESSFUL INCUMBENTS WILL BE ROTATED THROUGH THE FOLLOWING CENTRES:  
(DEPENDING ON THE DISCIPLINE)**

|   |
|---|
| eThekwini Metro Complex (includes Stanger and Port Shepstone Hospitals) |
| Ngwelezana/Empangeni Complex  |
| Northern Facilities (Newcastle and Madadeni)                            |
| PMB Metropolitan Complex  |

**NOTE: MEDICAL REGISTRARS-**

- \* Training will take place at various sites for each discipline.
- \* Registrars may be required to spend time at various training institutions/sites.
- \* The site for the 1<sup>st</sup> year of training and subsequent rotations will be determined by the Academic Head of Discipline.
- \* Applicants are requested to apply separately for the disciplines of their interest. A maximum of three applications will be allowed which should be ranked in order of preference. One application for various Disciplines will not be accepted.

- \* Applications from persons who are already appointed in the Registrar Programme will not be considered.
- \* As per HPCSA Regulations, the duration of Registrar training is 4/5 years, depending on the Discipline.
- \* All Registrars will be expected to register with the university for the MMED, at their own expense.
- \* All Registrars will be required to sign a contract which includes training AND service responsibilities.
- \* Registrars will be required to complete Performance Agreements and assessments as stipulated by the Department.
- \* Appointments are subject to the signing of a contract which includes a service pay-back period.

**NOTE: DENTAL REGISTRARS-**

- \* Training will be in Gauteng, Sefako Makgatho Health Sciences University (SMU).
- \* Dental Registrars will be responsible for finding their own accommodation.
- \* The duration of training is 4 years.
- \* All Registrars will be expected to register with the University for the MCHD/MDENT at own expense.
- \* All Registrars will be required to sign a service obligation contract with KZN DOH.
- \* Preference will be given to candidates from KZN.
- \* Appointments are subject to the signing of a contract which includes a service pay-back period.
- \* Please note that proof of successful completion of the required examinations as indicated, is a prerequisite and must be submitted if invited to an interview.
- \* The interview process will consist of technical and practical assessment aspects as well as an Ethical Assessment as part of the recruitment process. An assessment of competences will also be done as part of the selection process. This may include verification of qualifications, experience, reference checks etc. In addition to interview performance, selection will be based on multiple parameters.

**SALARY:** Entry level R1,001,349 per annum (This is an all-inclusive flexible remuneration package that may be structured according to specific rules).

**Applicants to note: Salary package is subject to OSD determination. Commuted overtime is Discipline-specific and must be applied for.**

**GENERAL MINIMUM REQUIREMENTS FOR ALL THE ABOVE POSTS:**

Tertiary qualification (MBCHB) or equivalent (MEDICAL) / Tertiary qualification BCHD/BDS or equivalent (DENTAL); **PLUS**

- Registration certificate for Independent Practice with the Health Professions Council of South Africa as a Medical Practitioner/Dentist;
- Current Annual Practising Certificate from Health Professions Council of South Africa;
- Twelve (12) months post Community Service experience as a Medical Officer//Dentist as at the closing date of this advert;
- Valid B/EB drivers license;
- Relevant Discipline-Specific Minimum Requirements as indicated below:

**Discipline-Specific Minimum Requirements**

| Discipline                                     | Discipline-Specific Minimum Requirements   |
|--|--|
| Anaesthesiology, Pain Medicine & Critical Care | Minimum 12 Months full-time experience in Anesthesia post-Community Service<br>and<br>DA (SA) (or equivalent)<br>and<br>FCA Part 1 examination (or equivalent) |
| Dermatology                                    | Minimum 6 months Medical Officer time in Dermatology<br>and<br>Minimum 6 months experience in a rural area or peripheral setting <u>post</u> community service |

|                           |   |
|---------------------------|---|
|                           | <p>and<br/> Contribution to social outreach programmes (shortlisted candidates will be requested to provide evidence and proof)<br/> and<br/> Accredited IsiZulu course for non-Zulu speaking candidates which should be attained within 1yr of registrar training.<br/> and<br/> Documented research or scientific peer reviewed publications.</p> |
| Emergency Medicine        | <p>Minimum 6 Months full-time, recent experience in the Discipline<br/> and<br/> Primary Exams in Emergency Medicine (FCEM Part I)</p>  |
| Internal Medicine         | <p>Minimum 12 months experience in the Discipline<br/> and<br/> FCP Part I<br/> and<br/> Minimum 6 months experience in a rural area or peripheral setting post community service.</p>  |
| Neurology                 | <p>Passed Part 1 Neurology exam<br/> and<br/> 6 months Internal medicine experience or 6 months as a medical officer in Neurology</p>   |
| Nuclear Medicine          | <p>Minimum 6 weeks' full time spent in Discipline</p>   |
| Neurosurgery              | <p>Minimum 6 months experience in Discipline<br/> and<br/> Primary exams</p>  |
| Obstetrics & Gynecology   | <p>Minimum 12 months experience in the Discipline at a Regional Hospital or at a hospital with a busy maternity unit (at least 300 deliveries per month)<br/> and<br/> FCOG Part I</p>  |
| Oncology                  | <p>6 Months full time, recent experience in the Discipline</p>  |
| Ophthalmology             | <p>Minimum 6 months experience in Ophthalmology post-Community Service<br/> and<br/> FC Ophthalmology (SA) Part I</p>   |
| Orthopaedics              | <p>24 months (recent) experience the Discipline of Orthopedics – HPCSA recognized site with consultant supervision<br/> and<br/> FCS (SA) Primary exams<br/> and<br/> ATLS training<br/> and<br/> Basic Surgical Skills Training</p>  |
| Otorhinolaryngology (ENT) | <p>FCORL(SA) or FCS(SA) Primary exams<br/> and<br/> Minimum 6 months experience in General Surgery and/or surgical specialties (e.g. ENT, neurosurgery, etc.)</p>   |

|   |   |
|---|---|
|   | and<br>Minimum 3 months ICU<br>and<br>FCORL(SA) or FCS(SA) Intermediate Exams   |
| Paediatric Surgery                        | Applicants must have passed the FCS (SA) Primary and Intermediate examinations.<br>In addition, they must have completed a minimum of one year in a surgical discipline, of which at least 3 to 6 months should have been in a Paediatric surgical unit.  |
| Paediatrics & Child Health                | Minimum 6 months experience in the Discipline in a Regional hospital<br>and<br>FC Paeds. Part I or Diploma in Child Health  |
| Pathology (Forensic Medicine)             | Dip For Med (Path)/(Clin-Path)  |
| Plastic Surgery                           | FCS(SA) Intermediate exam<br>and<br>6 months experience in the Discipline Plastic & Reconstructive Surgery.   |
| Psychiatry                                | Minimum 6 months experience in the Discipline<br>and<br>either FC Psych I or Diploma in Mental Health (or equivalent)   |
| Public Health Medicine                    | Minimum of 2 years Medical Officer time   |
| Radiology                                 | Minimum 12 months full-time experience as a Medical Officer in the Radiology Discipline post-Community Service<br>and<br>FC Rad Diag SA Part 1 exams  |
| Oral Medicine and Periodontology (Dental) | Minimum of three years of clinical experience as a general dental practitioner (Independent Practice)<br>and<br>Successfully passed at least two (2) of the primary subjects necessary to specialize in OMP (Anatomy, Physiology and General Pathology)<br>and<br>A postgraduate qualification (Postgraduate Diploma or Master of Science in Dentistry, preferably in OMP). |

- Candidates must clearly indicate on their Registrar information sheet whether they meet each of the general and discipline-specific requirements.
- The interview process will also consist of technical and practical assessment aspects as well as an Ethical Assessment as part of the recruitment process. This may include verification of qualifications, experience, reference checks etc.
- In addition to interview performance, selection will be based on multiple parameters.

#### **KNOWLEDGE, SKILLS, TRAINING AND COMPETENCIES REQUIRED**

- Basic knowledge of Medical Practice Ethics

- Ability to manage patients independently.
- Ability to learn, innovate and be prepared to work overtime
- Good interpersonal skills
- An interest in conducting research
- Knowledge and respect of the Patients' Rights Charter and Batho Pele Principle

**KEY PERFORMANCE AREAS**

- Participation in academic and teaching programmes and meetings in the respective Departments.
- Responsibility for care of patients at designated levels/sites, e.g. Outpatients, Wards, Theatres, ICUs etc.
- Management of patients under supervision.
- Attendance at Ward rounds and/or Tutorials.
- Supervision and teaching of undergraduates.
- Provision of after-hours care for emergency patient care services.
- Clerking and keeping of comprehensive records of patients in the Hospital File.
- Outreach activities as deemed necessary by the Clinical Supervisor
- Personal development to the level of independent specialist practice in the chosen field

**The Department reserves the right not to fill these post (s).**

**ENQUIRIES:** Mrs. R Erasmus: 033 395 2742/3347/2472

**APPLICATIONS CAN / MAY ALSO BE FORWARDED TO:**

THE HEAD OF DEPARTMENT  
 DEPARTMENT OF HEALTH  
 Natalia Building  
 330 Langalibalele Street  
 Room 6-106 South Tower

**ATTENTION:** Mrs. R Erasmus  
**TEL:** (033) 395 2742/3347/2472

Applicants are discouraged from sending applications through registered mail/postal service as the Department will not be responsible for non-collection of these applications.

# REGISTRAR INFORMATION (CV) TEMPATE

*To be submitted with Z83*

| PERSONAL INFORMATION  |         |       |        |          |       |
|---|---------|-------|--------|----------|-------|
| Surname   |         |       |        |          |       |
| Full Names  |         |       |        |          |       |
| Date of birth   |         |       |        |          |       |
| Postal address  |         |       |        |          |       |
| Physical address  |         |       |        |          |       |
| Contact number  |         |       |        |          |       |
| E-mail address  |         |       |        |          |       |
| SA ID number  |         |       |        |          |       |
| Passport Number   |         |       |        |          |       |
| Race  | African | White | Indian | Coloured | Other |
| Gender  | Female  |       | Male   |          |       |
| Language proficiency  |         |       |        |          |       |
| Do you have a valid SA Drivers Licence?   | Yes     |       | No     |          |       |
| Do you have a disability?   | Yes     |       | No     |          |       |
| Are you a South African citizen?  | Yes     |       | No     |          |       |
| Are you a South African citizen by descent/<br>naturalization?                                  | Yes     |       | No     |          |       |
| What is your Nationality if not South African?  |         |       |        |          |       |
| Do you have a valid work permit?  | Yes     |       | No     |          |       |
| Have you been convicted of a criminal offence or been<br>dismissed from employment?             | Yes     |       | No     |          |       |
| If yes, please provide the details  |         |       |        |          |       |
| <b>You will not be able to apply for this position if you are unregistered with the HPSA</b>    |         |       |        |          |       |
| Are you currently registered as a Medical Practitioner<br>with HPCSA? (Independent Practice)    | Yes     |       | No     |          |       |
| Please enter the date upon which you will have been<br>registered for the current year          |         |       |        |          |       |
| Please enter your HPCSA Number  |         |       |        |          |       |
| When did you first register with the HPCSA as a Medical<br>Practitioner? (Independent Practice) |         |       |        |          |       |
| Are you applying for another Discipline/s?  | Yes     |       | No     |          |       |
| If yes, which Discipline/s?<br>(indicate order of preference ranking)                           |         |       |        |          |       |

## REGISTRAR INFORMATION (CV) TEMPATE

| REGISTRAR POST QUESTIONS  |     |    |
|---|-----|----|
| Have you previously been employed as a Registrar or completed Registrar training?                       | Yes | No |
| At which University was this done?  |     |    |
| In which Discipline did you do Registrar time?  |     |    |
| When did you start this Registrar time?   |     |    |
| When did you complete this Registrar time?  |     |    |
| Why are you reapplying?   |     |    |
| Did you complete the previous registrar training?   | Yes | No |
| Please state the reasons why you did not complete the training?   |     |    |
| EDUCATIONAL QUALIFICATIONS  |     |    |
| Where did you obtain your undergraduate degree? (MBCHB or equivalent)                                   |     |    |
| When did you obtain your undergraduate degree? (MBCHB or equivalent)                                    |     |    |
| If you have a foreign qualification, please indicate where and when you obtained the qualification from |     |    |
| Do you have an Evaluation Certificate from SAQA for the foreign qualification?                          | Yes | No |
| Have you obtained the Diploma in the Discipline you are applying for?                                   | Yes | No |
| When did you pass your Diploma?   |     |    |
| Please enter your Diploma exam number if you are currently writing                                      |     |    |
| Do you have a Diploma equivalent qualification?   | Yes | No |
| When did you obtain this Diploma equivalent qualification?  |     |    |
| Do you have the Primary examination/Part 1 in the Discipline you are applying for?                      | Yes | No |
| When did you obtain your Primary/Part 1?  |     |    |
| Please enter your Primary/Part 1 exam number if currently writing                                       |     |    |
| Do you have a Primary/Part 1 equivalent qualification?  | Yes | No |
| When did you pass this Primary/Part 1 qualification?  |     |    |
| Do you hold any other qualifications? (ACLS, ATLS, ACTS etc.)   |     |    |
| WORK EXPERIENCE   |     |    |
| During which period did you complete intern training?   |     |    |
| During which period in your Internship training did you train in the Discipline you are applying for?   |     |    |

## REGISTRAR INFORMATION (CV) TEMPATE

|  |     |    |
|--|-----|----|
| Where did you complete your community service?   |     |    |
| During which period did you complete community service?  |     |    |
| What proportion of your community service year was in the Discipline you are applying for?   |     |    |
| Have you been appointed as a Medical Officer since completing Community Service?   | Yes | No |
| <b>You are not eligible for a Registrar post until you have completed more than 12 months Medical Officer time at the closing date of the advert for this post</b> |     |    |
| <b>MEDICAL OFFICER EMPLOYMENT</b>  |     |    |
| Organisation employed at as Medical Officer appointment after community service?   |     |    |
| Which speciality was this Medical Officer appointment under?   |     |    |
| Period of employment?  |     |    |
|  |     |    |
| Organisation employed at as Medical Officer appointment after community service?   |     |    |
| Which speciality was this Medical Officer appointment under?   |     |    |
| Period of employment?  |     |    |
|  |     |    |
| Organisation employed at as Medical Officer appointment after community service?   |     |    |
| Which speciality was this Medical Officer appointment under?   |     |    |
| Period of employment?  |     |    |
|  |     |    |
| Organisation employed at as Medical Officer appointment after community service?   |     |    |
| Which speciality was this Medical Officer appointment under?   |     |    |
| Period of employment?  |     |    |
|  |     |    |
| Organisation employed at as Medical Officer appointment after community service?   |     |    |
| Which speciality was this Medical Officer appointment under?   |     |    |
| Period of employment?  |     |    |
|  |     |    |
| Organisation employed at as Medical Officer appointment after community service?   |     |    |
| Which speciality was this Medical Officer appointment under?   |     |    |
| Period of employment?  |     |    |
|  |     |    |
| Organisation employed at as Medical Officer appointment after community service?   |     |    |
| Which speciality was this Medical Officer appointment under?   |     |    |

## REGISTRAR INFORMATION (CV) TEMPATE

|   |     |    |
|---|-----|----|
| Period of employment?   |     |    |
| Please list other employment that you have had. You may be contacted to provide more details. |     |    |
| Please explain any gaps longer than 3 months in your employment history.                      |     |    |
| Are there any additional notes you would like to make about your employment history?          |     |    |
| <b>REFERENCES</b>   |     |    |
| Do we have your permission to contact your referees to provide us with a closed reference?    | Yes | No |
| If not, please contact the relevant Discipline to do discuss this choice                      |     |    |
| <b>CURRENT LINE MANAGER</b>   |     |    |
| Title of your current line manager?   |     |    |
| Organisation/Institution of current line manager?   |     |    |
| Initials and surname of your current line manager?  |     |    |
| Email address of your current line manager?   |     |    |
| Contact number of your current line manager?  |     |    |
| <b>OTHER REFEREES</b>   |     |    |
| Title of referee?   |     |    |
| Organisation/Institution of referee?  |     |    |
| Initials and surname of referee?  |     |    |
| Email address of referee?   |     |    |
| Contact number of referee?  |     |    |
|   |     |    |
| Title of referee?   |     |    |
| Organisation/Institution of referee?  |     |    |
| Initials and surname of referee?  |     |    |
| Email address of referee?   |     |    |

## REGISTRAR INFORMATION (CV) TEMPATE

|  |     |    |
|--|-----|----|
| Contact number of referee?   |     |    |
| <b>ADDITIONAL FACTORS – RESEARCH TYPE EXPERIENCE</b>   |     |    |
| Have you done a research methodology course?   | Yes | No |
| If yes, which research methodology course did you do?  |     |    |
| What is the name of the course you have done/ are involved in?   |     |    |
| Which Institution provides this course?  |     |    |
| What is the duration of this course?   |     |    |
| Is a formal qualification issued at the end of the course?   | Yes | No |
| Have you completed a Good Clinical Practice (GCP) certificate?   | Yes | No |
| If yes, which GCP certificate have you obtained?   |     |    |
| Have you ever presented a poster/s or given a lecture at a congress?   | Yes | No |
| If yes, which meeting/s did you present at?  |     |    |
| When did you present?  |     |    |
| What was the title/s of the presentation or poster/s?  |     |    |
| Have you ever been credited with authorship on paper/s?  | Yes | No |
| What was your role on the paper/s?   |     |    |
| Please provide journal reference/s for the paper/s   |     |    |
| <b>ADDITIONAL FACTORS: LEADERS</b>   |     |    |
| Have you held a leadership position/s that you regard as advantageous to this application?                                     | Yes | No |
| Please describe the leadership position/s?   |     |    |
| Have you held another significant leadership position/s?   | Yes | No |
| Please describe the leadership position/s?   |     |    |
| <b>END OF GENERAL SECTION OF APPLICATION PROCESS</b>   |     |    |
| Are there any special circumstances that the Committee should be aware of? Examples would be disability and/or chronic illness | Yes | No |
| If yes, please provide details of your special circumstances   |     |    |

# REGISTRAR INFORMATION (CV) TEMPATE

Please provide any other information which you deem relevant for this application

**Date completed**

**Signed**