

**Dental Core Training  
Academic Progress Report  
&  
IRCP/FRCP  
Panel Feedback Form**

*This form supports the review process and should form part of the trainee's permanent record  
The form can be typed into directly, electronic signatures added and then converted to a pdf before uploading to Axia.*

<b>Deanery / HEE Local Office</b>			
<b>Trainee Full Name</b>			
<b>Dental Core Training (DCT1, DCT2, DCT3)</b>			
<b>Full Time (FT) / Part Time (LTFT) %</b>			
<b>IRCP / FRCP</b>			
<b>Period covered</b>	<b>From</b>		<b>To</b>
<b>Date of RCP Panel meeting</b>			
<b>Date of Academic Progress Report</b>			
Markers of achievement during this assessment period. Have you:	<i>If answered 'Yes', please give full details</i>		
1 Given any national or international presentations?	Yes		
	No		
2 Published any peer-reviewed papers?	Yes		
	No		

3 Won any competitive grant funding?	Yes	<input type="checkbox"/>	
	No	<input type="checkbox"/>	
4 Won any prizes for your academic work?	Yes	<input type="checkbox"/>	
	No	<input type="checkbox"/>	
5 Completed study for any higher degree?	Yes	<input type="checkbox"/>	
	No	<input type="checkbox"/>	
6 Completed any public or patient engagement work?	Yes	<input type="checkbox"/>	
	No	<input type="checkbox"/>	
Please provide details of any significant academic outputs during the assessed period (eg. Grants / Fellowships awarded – National / International)			

<b>Recommendations</b> <i>(Include details of any future academic plans)</i>	
<b>Trainee Signature</b>	
<b>Date</b>	
<b>Academic Supervisor Name</b>	
<b>Academic Supervisor Signature</b>	
<b>Date</b>	