

## SA/NT Part Two Long Course Trainee Agreement

It is a requirement that you enrol into the part two long course. Regular attendance is an expectation. If you are unable to attend a session you will need to provide a valid reason prior to the session. The sessions will be hybrid with trainees at the presenting hospital required to attend the session Face2Face, and all other trainees to attend online.

If you fail to attend three sessions without providing valid reasons, your enrolment in the course will be suspended. If your enrolment is suspended, you will not be permitted to attend the sessions. Attendance at future sessions will then require the written approval of the Part two long course convenor.

NB: SANTRATS trainees based at RDH and NT independent anaesthetic trainees are exempt from the attendance requirements, and it is noted they will only attend when their schedule allows. Non-SA/NT trainees, based at RDH, may attend the online sessions if streamed in the department, however, will not be given direct access to the part 2 notifications, Zoom link or online material.

As a part two participant you will receive the part two program, presenter documents (where available), access to the part two learning management system and ad hoc program updates.

## Responsibilities and declaration by the applicant - return to mgully@anzca.edu.au

- 1. I will endeavour to attend each session.
- 2. I will have my camera on and engage with the presenters to encourage an interactive session.
- 3. If I am unable to attend a session, I understand it is my responsibility to email an apology and reason for non-attendance by the Wednesday prior to each tutorial.
- 4. I understand if I do not attend more than three sessions without a valid reason, I will no longer be able to attend and will no longer be on the part two distribution list or network. If withdrawn from the course, I will need approval from the part two convenor to continue to participate.

## Acceptance by the applicant (return to sa@anzca.edu.au)

I accept the responsibilities as outlined in this agreement.

Name					
Provide your College ID as signature				Date	
Trainee exam status					
I am planning to sit the part two exam		Month/Year			
l am plar	nning to attend the part two course	From	Month/Year	То	Month/Year