Part B

# Application for a joint RCS England /NJR Surgical Research Fellowship

Confidential Report from present Head of Department

**Applicant’s Name:**

**Head of Department:** The above named applicant has applied for an RCS England Surgical Research Fellowship, would you please complete and return, in confidence, by the closing date to either the applicant or research@rcseng.ac.uk

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| 1. Candidate’s scientific ability and suitability for a Fellowship, the primary purpose of which is to provide support for a period of research training.
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| 1. Is this an original research project? Will it take place at an appropriate centre?
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| 1. Head of Department
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| Name(Head of Department) | Title: |
|  Signature:  (Head of Department)  | Date:  |
| Address of department:  |  |
| Telephone number:  |  |