

What am I asked for at each stage of my BST General Paediatrics application?

You will be able to save and exit your application at different stages throughout your application, however you are unable to move through the application without entering required information.

1. Your Details

You will be asked to enter the following personal details:

- Title
- First Name
- Middle Name
- Last Name
- Email
- Date of Birth
- Gender

2. Correspondence Details

You will be asked to enter the following:

- Country
- Address
- Email
- Postcode
- Phone
- Mobile

3. Professional Qualifications / Awards

- You will be asked to enter your Professional Qualifications below, including both undergraduate and postgraduate qualifications.
- In the External Award field enter the post-nominal of the qualification e.g. MRCP. In the Description field enter the full name of the qualification.
- In the Awarding Body field enter the recognised organisation that awarded your qualification. In the Date of Award field enter the date you received the qualification.
- If you are awaiting results please write '*Awaiting*' in the Result field.

4. Medical Council Information

You will be asked to enter the following (if applicable):

- Medical Council Registration Number
- Where applicable, the first date of registration with the Medical Council
- The name of the country in which you are completing/completed your medical degree
- If you are a Direct entry or Graduate entry to medicine
- If you are completing / have completed your medical degree in Ireland; are you an EEA (European Economic Area) national
- If you are currently completing your intern year
- Where you have completed/are completing your internship
- If you are a CAO/HEA graduate
- If you have previously completed a BST programme in Ireland?

5. Employment History

At this stage you will be asked to enter your employment history. This is limited to the four most recent posts you have held. You will be asked for:

- Employer name
- Job title
- Start date
- End date
- Brief Description of main responsibilities (limited to 300 characters)

6. Experience to Date

You will be asked the following:

- Your decile / centile place within your graduating class.
- If you have been published in an International Journal (First Author) and supporting DigitalObject Identifier or effective weblink
- If you have presented at an International Peer Review meeting and supporting Digital ObjectIdentifier or effective weblink
- If you have been published in an International Journal (Joint Author) and supporting DigitalObject Identifier or effective weblink
- If you have been published in a National Journal (First Author) and supporting Digital ObjectIdentifier or effective weblink
- If you have published a Case Report in a Peer-Reviewed Journal and supporting DigitalObject Identifier or effective weblink
- If you have presented at a National Meeting and supporting Digital Object Identifier, effective weblink or PDF evidence.
- If you have been published in a National Journal (Joint Author) and supporting Digital ObjectIdentifier or effective weblink
- If you are a completed or published author and supporting Digital Object Identifier or effective weblink
- Skills courses that you have completed – please list only the five most relevant to your application.
- To list any additional professional achievements, you would like to include e.g. Bursaries or Awards. You must provide the Digital Object Identifier (DOI), an effective web link here or upload PDF evidence at the end of the application for each item listed.

7. Career Objectives

Here you will be asked to set out your aims and career objectives should your application be successful. This is limited to 1000 characters.

8. References

You will be asked for the details of two employer referees. One of these referees must be your present or most recent employer. Your listed referees must complete the provided appraisal forms ([found here](#))

Details required for each referee:

- | | | |
|---------|---------|------------|
| • Title | • Phone | • Hospital |
| • Name | • Email | |

9. Disclosures

You will be asked to disclose the following:

- If your application is successful, that the information you have provided will be made available to relevant parties.
- If your application is successful, that you understand that your participation in this programme throughout its duration is dependent on you meeting both the training body's and employer's relevant requirements.
- That you agree to any information supplied by you in this form being held on record by the RCPI.
- If you have a disability
- Your country of citizenship/dual citizenship (if applicable)
- If you hold a current Stamp 4 visa
- If you applied and accepted a place on a RCPI BST programme in the past

10. Declarations

At this point you will be asked to declare if the following are true or false:

- I have not at any time been convicted (e.g. probation, fine, sentence, penalty) of a criminal offence (e.g. assault, public order, sexual assault) in the Republic of Ireland and/or in any other jurisdiction nor are there any charges relating to criminal offences outstanding or pending.
- I have never been the subject of a Caution or Bound over order.
- I currently am not nor was I ever the subject of an investigation by any professional medical training body or its equivalent in the Republic of Ireland and/or in any other jurisdiction.
- I am not nor have I ever been the subject of any investigation by a medical registration or licensing body or authority in any jurisdiction with regard to my medical practice or conduct as a practitioner.
- I accept that making a false or misleading declaration may render any offer of a training position and associated employment offers as null and void.
- If you answered FALSE to ANY of the above please provide details here and contact the RCPI Medical Training Department.
- How you meet the [English Language requirements](#) as set out by the HSE

11. Document Upload

You will be asked to upload all the required documents for your application. These are:

- Centile/Decile place
- Proof of Irish Medical Council registration
- Proof of English language competency
- Two Appraisal Forms
- Passport identity page
- Stamp 4 Residency Permit (if applicable)
- PDF Evidence of Research and Other Qualifications