

Title  First name  Surname

Address

Suburb  State  Postcode

Country  Telephone

Email

Current medical position  Specialty practiced

Current hospital appointments

Describe your experience and qualifications in literature evaluation and research

Outline your teaching experience and why you're interested in becoming a CLEAR instructor

Please outline your career milestones (a brief CV)

**In applying to become a CLEAR instructor, I will make myself available to instruct on at least two CLEAR Courses within the next twelve months and envisage being involved in instructing on CLEAR courses in Australasia for a minimum of 5 years.**

I consent to the information on this form being used and disclosed as stated below. RACS is collecting the information on this form for the purpose of processing your course registration. This information may be disclosed to those responsible for the administration and conduct of the course including external parties who provide administrative and organisational support. The College may also need to verify the information provided on this form with external institutions or individuals, and gather additional information in order to process your registration. We may also disclose personal information where we are required to do so by law. If you fail to provide this information the College will be unable to process your registration. You may gain access to the personal information you have provided on this form and other personal information we hold about you by contacting the College's Privacy Officer on 03 9249 1200. You also have the right to update and correct any personal information we hold about you.

To submit your application please email this form to [clear@surgeons.org](mailto:clear@surgeons.org) If you have any queries regarding the completion of this form please contact:

CLEAR Program Administrator  
+61 3 9276 7450

Royal Australasian College of Surgeons  
250-290 Spring Street  
East Melbourne VIC 3002