# Form R (Part A)

Form submitted on	11 October 2024 12:13 (BST)
Status	SUBMITTED
Modified	12 November 2024 13:14 (GMT)
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ARCP Form?	true
Linked Programme	550e8400-e29b-41d4-a716- 446655440000
Managing Deanery / Local Office	London

## **Personal Details**

Forename	Anthony
<b>GMC-Registered Surname</b>	Gilliam
GMC Number	1234567
Date of Birth	05 April 1980
Gender	gender
Immigration Status	immigration status
Other Immigration Status	other immigration status
Primary Qualification	qualification
Date Awarded	07 June 2004
Medical School Awarding Primary Qualification (name and country)	medical school
Home Address	address line 1
	address line 2
	address line 3
	address line 4
Post Code	AB12 3CD
Contact Telephone	+441200900000
Contact Mobile	+447700900000
Email Address	test@testy.com

### **Programme Declarations**

I confirm that	I have been appointed to a programme leading to award of CCT
Programme Specialty	programme specialty
Specialty 1 for Award of CCT	cct specialty 1
Specialty 2 for Award of CCT	cct specialty 2
Royal College / Faculty Assessing Training for the Award of CCT	college
Anticipated Completion Date of Current Programme (if know)	09 August 2024

#### **Programme Details**

Training grade	training grade
Start Date	10 September 2021
Post type or Appointment	Substantive
Training hours (Full Time Equivalent)	0.5

#### **Declarations**

- I confirm that the above information is correct.
- I will keep my Designated Body and the GMC informed as soon as possible of any change to my contact details.