

Position title

Section A: Details of proposed practice

You must provide details of your employment offer for approval by the RACGP. If your job offer is approved, it is approved for the position you have submitted. If your employment changes, you must notify the RACGP immediately.

Practice name

Address

Suburb

State

Postcode

Modified Monash Model Classification (MMM1-7)

Distribution Priority Area (DPA) Yes No

Supervisor contact details

Supervisors must meet the requirements of the [RACGP's supervision policy](#) available on the PEP Specialist Stream policy webpage.

Full name

Role in practice

Email

Telephone

Section B: Position details

1. Will you be expected to provide comprehensive general practice services, including treating all ages, genders and health conditions, providing preventive care, and personally scheduling and providing patient follow up?

Yes No

2. If no, please provide details of any limits on your scope of practice and roles that you will not be expected to perform (eg reduced demographic range)

Please complete the below section if you answered either yes or no for Question 1:

3. Do you have any areas of special interest? (eg skin cancer, womens health)
Please indicate what proportion of your role will be spent working specifically in this area.

4. What will your contracted hours of work be?
(Note: this must meet the minimum part-time hours of 14.5 hours per week over a minimum of two days)

5. Are more than 50% of these working hours in the after-hours period?

Yes No

If you answered **yes** to Question 5

a) Is the practice an Approved Medical Deputising Service?

Yes No

6. Do you have a contract to work at this practice for at least six months?

Yes No