

**WESSEX DEANERY**

**The Specialist Training Committee of the Wessex School of General Practice**

The STC of the Wessex School of General Practice, being empowered to approve and re-approve the appointment of Trainers in General Practice, has drawn up a series of Deanery Criteria in accordance with the Guidelines issued by the Joint Committee on Postgraduate Training for General Practice.

On approval I undertake to adhere to the Criteria as set out in the PRIMARY CARE

SPECIALTY TRAINING SERVICE LEVEL AGREEMENT with the Deanery **(being created now).**

Signature.....

Date .....

Name *(in block letters please)*

.....

We the undersigned are committed to support Dr. ....  
in his/her activities as a trainer and are prepared to contribute to the  
development of the Practice as a learning environment.

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(Partners and Practice Manager)

To be returned to:

**Dr**  
**Associate Dean of Postgraduate General Practice Education**