NEPSEC North of England Pathology and Screening Education Centre

NHS

COURSE APPLICATION FORM

Please contact our administration team for availability before returning this form:

Telephone: 0113 2466330 **Email: sht-tr.nepsec@nhs.net** **Website: www.nepsec.org.uk**

DETAILS OF THE COURSE FOR WHICH YOU WISH TO APPLY:	
COURSE TITLE:	**COURSE FOR THE EXPERT ROLE IN SPECIMEN DISSECTION 2026**

DELEGATE INFORMATION:		
TITLE:	FORENAME:	SURNAME
JOB TITLE:		
EMPLOYMENT ADDRESS:		
TELEPHONE:	EMAIL for confirmation and Teams invitation:	
SPECIAL REQUIREMENTS: (i.e. Dietary, access etc.)		

Please indicate the modules you are applying for in 2026 and provisional dates for any modules you wish to attend in the future:

Module	2026	Future	Module	2026	Future
Full Programme			Placental and Gynaecological		
Introductory modules (2 days)			Hepatobiliary and Gastrointestinal		
Portfolio Preparation and Exam Questions & Head and Neck			Uropathology and Osteoarticular and Soft Tissues		
Endocrine (minus pancreas) and breast			Revision Days (2 days)		
Skin					

Course fees: Full Programme = £1600; Single Day Module = £160.00;

Participants from NHS organisations from the North East, North West, Yorkshire and East Midlands regions = £15.00 per Single Day Module

Please indicate if you intend to sit the IBMS diploma of Expert Practice in Histological Dissection and if so when:

METHOD OF PAYMENT: Please check our website or contact the administration team for appropriate fees.

☐ **Card:** Please enter contact details below if different from above:

☐ **Card Holder Name:**

☐ **Tel:** **Email:**

☐ **Employer:** Please send an invoice to the following address:

Purchase Order Number: *(Required from employer for invoicing purposes)*

Please confirm the Purchase Order Number on the booking form and/or send confirmation with this form.
The purchase order should be raised to "Sheffield Teaching Hospitals NHSFT and marked for the attention of NEPSEC. . ***Places on the course cannot be fully secured until a full payment or an official purchase order document is received.*** *The purchase order should be marked for the attention of the NEPSEC (see address below).*

LINE MANAGER AUTHORISATION:	
I have given approval for the above named person to attend the North of England Pathology & Screening Education Centre	
NAME:	DESIGNATION:
SIGNATURE:	**DATE:**

How did you hear about this course?				
NEPSEC Website	Word of Mouth	Conference	Journal	Other
If you have selected Conference, Journal or Other please specify here				

SIGNATURE _____ **DATE** _____