Professional Diploma in Orthodontic Therapy
Outline of Work Placement - STUDENT/TRAINER TO COMPLETE

Applicant Name:

Please complete your proposed training timetable below. In each box, please provide the following information:
- **Where the session will take place – initials can be used**
- **Who the trainer/supervisor for the session will be – use trainer/supervisor initials**
- **Non-working sessions for the student should be marked – use 'NON-WORKING' or 'N-W'**
- **Enter normal AM and PM start time and end time**

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
AM						
PM						
Time distribution:						
Clinical (hours)						
Non-clinical (hours)						
Non-working (hours)						
Total						

TYPICAL EXAMPLE:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
9.00 to 1.00pm	Orthodontic Treatment *JB*	Clinics/ Record Collection/ Digitalising *JB*	New Patient Clinic/ History/ Taking Records *JB*	Orthodontic Treatment *JB*	Self-directed learning/ eLearning/ Case Presentations	Orthodontic Treatment *JB*
Lunch break						
2.00 to 5.30pm	Orthodontic Treatment *JD*	Orthodontic Treatment *JB*	Orthodontic Treatment *JD*	NON-WORKING	Self-directed learning/ eLearning/ Case Presentations	NON-WORKING
Time distribution:						
Clinical (hours)	7.5	7.5	3.5	4	0	4
Non-clinical (hours)	0	0	4	0	7.5	0
Non-working (hours)	0	0	0	3.5	0	3.5
Total	7.5	7.5	7.5	4	7.5	4

A 15 minute break should be scheduled within each session.

JB - Joe Bloggs
JD - John Doe