

Burns & Scar Management

Training Course Application Form

Please indicate which course(s) you wish to attend, details can be found at www.jobskin.co.uk/ training-courses:

Jobskin®	Jobskin ®	Jobskin [®]
Premium	Classic	Hand Therapy

All fields must be completed in order to process your request

Course Date(s)							
1.			2.				
Contact Details							
Contact Name:			Telephone:				
Email:			NHS Private Practice Clinic				
Job Title:		Ple	ease indicate:	🗌 Pa	ediatric	Adult	
Hospital Name:							
Address Line 1:							
Address Line 2:							
Town/City: Co		County:			Post Code:		
What is the reason for applying for our training course? Please note applications must be current customers or new customers to Medigarments Ltd who will be prescribing and ordering pressure garments							
Refresher Training	Rotational Post		New Position		Private Practice		
Please include your current position and detail your experience level in burns & scar management							

Objectives - Please share your objectives for attending this course



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We are the UK distributor of ScarSil[®] topical gel, what silicone products do you currently recommend/purchase?

How did you hear about our training courses?

Colleague recommendation

Medigarments recommendation

Online search

Other, please specify below

Please indicate if you have any dietary requirements:

Please indicate if you have any additional needs, our offices are on the second floor up a stone spiral staircase:

What to do now

- 1. Complete and return this form by email to dw@jobskin.co.uk to secure your place.
- 2. If you wish to hotel overnight, please see Helpful Information on our website for local hotels.
- 3. Save the date and contact us with any questions you may have. Please let us know as soon as possible if you need to cancel your booking. We will contact you leading up to the event to remind you, please ensure you provide a contact number and email address.