SCHEDULE 3

Regulation 30(3)

PART X

INFORMATION TO BE SUPPLIED BY DOCTOR APPLYING FORINCLUSION IN AN OBSTETRIC LIST

- 1. Name.
- 2. Address of practice premises.
- **3.** Registration number in the Medical Register and date of first registration.
- **4.** Details of relevant obstetric experience during the previous 10 years (and, if appropriate, before that date), together with any references.
 - **5.** Details of relevant training undertaken during the previous 5 years.
 - **6.** Title of any relevant post-graduate qualification held and date awarded.