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**Discretionary Study Leave Request/Application Form**

After a Discretionary Study Leave activity has been agreed with your Educational Supervisor, please check the application guidance here <https://kss.hee.nhs.uk/resources-information/study-leave/> and read the following notes before completing and signing this form electronically:

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| **Notes:**  **Discretionary Categories.** Discretionary activity approval should only be sought for activities which are not listed as **Essential** or **Supporting** on the applicable specialty’s Approved course lists, and also for any international study leave activities.  **Study Leave Days only**. If you are requesting Study Leave days and require no Study Leave funding, then you do not need complete this form or follow the NHSE KSS application process: instead you should liaise directly with your employer regarding leave for an activity.  **Timelines**. You should commence the study leave application process at least 10 weeks in advance of the activity to ensure that prospective, final approval has been obtained at least 6 weeks before the activity. Retrospective applications will not be processed or paid.  **Approvals**. If your Training Programme Director (TPD) approves the Discretionary request, they will forward your request to your Head of School, who will contact the KSS Study Leave Team directly if they approve your request. If your TPD or Head of School does not approve your request they will contact you to inform you and explain why.  **Unique Discretionary Approval code**. If approved by the Head of School, the KSS Study Leave Team/GP Team/Dental Team (as applicable) will email you with formal approval and a unique approval code. This approval code will enable you to apply for prospective approval within your Trust and also claim reimbursement after you have attended the activity.  **Reimbursement:** Once you are ready to claim for reimbursement, you will need to submit your claim to your employing Trust in line with their local claims processes and within a maximum of THREE MONTHS after the activity has taken place:   * You will need to provide the associated unique discretionary approval code and evidence of payment (e.g. receipts for the event fee/ travel/accommodation) to enable verification of the amount to be reimbursed. * Your Trust will reimburse you accordingly via payroll.   **International events**. For international events, subsistence costs cannot be claimed, and where NHSE agrees to provide a contribution, it will fund the lower amount of **either** the course fee **or** the travel/accommodation expenses, up to an absolute maximum of £1,000.  More information on study leave, including the application process, travel and accommodation and an A-Z, can be found here: <https://kss.hee.nhs.uk/resources-information/study-leave/>. |

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| **PERSONAL DETAILS** |

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| First Name: |  |
| Surname: |  |
| Email address: |  |
| Contact phone number: |  |
| Professional registration number (GMC/GDC/GPhC etc) |  |
| Trust: |  |
| Training Programme and Grade: |  |
| Speciality: |  |
| Current Placement: |  |
| Current Clinical Supervisor: |  |
| Current Educational Supervisor: |  |

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| **ACTIVITY DETAILS** | |
| **Name of Discretionary Course/Activity:** |  |
| **If this application for an international activity (i.e. held outside the UK)?** | Yes/No\*  If you have answered “**no**” go directly to the “**Course/Activity Location**” Section below |
| * You are only able to claim funding for one international event per training programme (defined as Foundation, Core, and Higher), or one event every 3 years if you are on a run-through programme. * It is your responsibility to confirm you have not previously attended an international event during your current programme. * Resident Doctors found to have already received funding for attending another international event will be liable to repay the costs in full and face investigation.   **If this application is for an international activity, have you previously received financial support from NHSE towards an international activity during your current training programme?** | Yes/No/N/A\*  If “yes” you would only be eligible for further international funding for exceptional reasons. |
| To qualify for funding contribution towards attending an International conference, you must be presenting a poster or an oral presentation.  **Are you** **presenting a poster or an oral presentation?** | Yes/No\*  If “No” it is unlikely you will be eligible for international funding. |
| **Activity Location (including country if outside the UK):** |  |
| **Activity Start Date:** |  |
| **Activity End Date:** |  |
| **ACTIVITY COSTINGS** | |
| **Activity Fees (including Conference registration fees):** | £ |
| **Breakdown of Travel Expenses:**   * Early booking for travel should be undertaken where possible to minimise the cost associated with attending the event. Taxi fares will only be considered in exceptional circumstances, and you will be required to demonstrate that public transport was not available to complete your journey. * Please read the guidance on travel, accommodation and subsistence here, and the guidance travel and accommodation for international events here: <https://kss.hee.nhs.uk/study-leave-a-z/> | £ |
| **Breakdown of Accommodation Expenses:**   * Please note that the maximum that can be reimbursed for accommodation is £120 per night in the UK, except for London (£150), and for international locations it is £150 per night. | £ |
| **Total Estimated Claim Amount for international events only:**   * Please note, for international events NHSE will fund the lower amount of **either** the course fee **or** the travel/accommodation expenses, up to an absolute maximum of £1000. * No subsistence expenses can be reimbursed for international courses.​ | **£** |
| **Total Estimated Claim Amount for UK courses:**   * Please note that there is a maximum contribution of £1,000 per discretionary activity in the UK, inclusive of course/conference fee/travel/accommodation/subsistence. | **£** |
| **Justification for attending the activity; include a summary of how the activity links to your curriculum/PDP/learning objectives:** | |
| **Justification for attending an activity located outside of London, Kent, Surrey or Sussex:** | |
| **I can confirm that I have received Educational Supervisor approval for this event** | Yes/No\* |
| **I understand that the claim for reimbursement must be submitted to my employing Trust (with accompanying evidence) within a maximum of THREE MONTHS after the activity has taken place.** | Yes/No\* |
| **I confirm the data I have submitted is accurate and that it can be processed by NHS England (NHS England's Privacy Notice is** [here](https://www.england.nhs.uk/privacy-policy/)) | Yes/No\* |
| **Signed** *(electronically*)**:** |  |
| **Date:** | **/ / 2025** |

**Next steps:** Once you have completed and signed this application form, please forward it to your TPD via email to request approval for the Discretionary Study Leave activity. If you do not know who your TPD is or do not have their contact details, please ask your Educational Supervisor in the first instance. If they are unable to assist, then please contact your Head of School or your Specialty/School team at NHSE.