



Application for DAS Verified Courses & Workshops

Please complete this form and return it with the relevant supporting documents and fee (where applicable) either by email, to DAS@aagbi.org, or by post to the address below. Please allow up to four weeks for your application to be processed.



Difficult Airway Society
Association of Anaesthetists of Great Britain & Ireland
21 Portland Place
London
W1B 1PY

Please complete the information below as you would like it to appear on the 'Verified courses' section of the DAS International Airway Courses and Workshops.

Event title:			
Start date:		End date:	
Providing organisation's name, postal address and website details (if applicable):			
Venue name and location:		Lead organiser: (must be a clinician of consultant status)	
Fee details:		Nominated contact: (name, telephone and email details)	
Nominated commercial sponsor(s):			

Educational information

Target audience (please mark with an 'X' as appropriate):

- Consultants
 Training grades
 Non-medical

Target audience – geographical area (please mark with an 'X' as appropriate):



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- International National Regional Local

How and where do you intend to advertise your event?

Please state the overall aim of the event and topics to be covered:

Please state the anticipated learning outcomes of the event:

1	
2	
3	
4	

How many CPD credits are you applying for?

(Please note each credit equates to one hour of educational content. The number of hours should exclude break times.)

What teaching methods will be used? (Please mark with an 'X' as appropriate):

- Lectures Tutorials Demonstrations Practicals Workshops
- Discussion groups e-Learning MCQs Individual performance review
- Other (please specify) _____

Have you held a similar event previously? If yes, please provide details below.

Has this event been previously approved by another organisation?

(If so, please provide further details below.)



Supporting documents for Verified Courses approval

Please include the following supporting documents (marked with an 'X' if submitted). The first three items are mandatory.

- Event programme detailing topics mapped to curriculum and aims of the workshop
- List of speakers and their post/title e.g. Consultant; Senior Lecturer; Resident etc.
- A copy of the delegate evaluation form.
- Event learning materials (where applicable).
- Pre- or post-course educational activity e.g. reading lists, MCQ papers (where applicable).

Conflict of interest

Please provide details of any conflicts of interest below. A conflict of interest exists where an individual involved in the development or delivery of the course has an interest in a commercial or other organisation which may compete with the individual's duty to act independently.

Type of organisation

What is your organisation type? (Please mark with an 'X'):

- Commercial Non-commercial / not for profit

For commercial organisations providing events an application and evaluation fee of £250 (incl. VAT) per event is payable. Please contact DAS@aagbi.org

Correspondence

Please include your contact information for future correspondence, if different from the information already provided.

Name:	
Email:	
Address:	
Tel:	

Signed..... Print Name.....