**University of Southampton**

**Doctoral Programme in Clinical Psychology**

**Annual Review Form**

Trainee Year of Training

Clinical Tutor

Date of Review

Training priorities carried forward from previous review

1

2

3

4

5

Achievement during year

Academic

Research

Clinical

Personal

Current strengths and areas for development

Use competencies checklist to identify

Areas of particular strength

Areas where more experience is required

Likes, dislikes and career plans

Aspects of the training programme which are particularly enjoyable

Aspects of the training programme which are less enjoyable

Any areas of anxiety/concern

Agreed training priorities, and plans about how these might be achieved.

1

2

3

4

5

Signed ................................................................(Trainee)

 ................................................................(Clinical Tutor)