

RCH Foundation of Paediatric Practice Program 2026- Aboriginal and Torres Strait Islander

Application Form

Please complete this form and upload to your RCH Careers application in the 'Cover Letter' field.

About you

APPLICANT DETAILS			
Name:		Email	
Residential Address:			
University:		Course	

Rotation and Intake Preferences

Ambulatory Care – Day Medical and Specialist Clinics
 Butterfly – Newborn Intensive Care Unit
 Cockatoo – Surgical and Neuroscience Care
 Dolphin – Short Stay Emergency
 Emergency Department
 Kelpie – Adolescent & Rehabilitation Care
 Koala – Cardiac & Renal Care

Kookaburra – Cancer Care
 Perioperative (*including Theatre, Recovery, Possum – Surgical Short Stay and Day Surgery*)
 Platypus – Surgical Care
 Rosella – Paediatric Intensive Care Unit
 Sugar Glider – Medical Care
 Wombat – Medical Care

Please outline if there is a clinical area(s) where you would prefer not to work.

TELL US ABOUT YOURSELF
Please complete each of the questions below in 150-200 words. Do not exceed space provided.
RCH Values: Curious The RCH Compact states, "I am curious and seek out way to constantly learn and improve". Please provide an example of how you have demonstrated curiosity whilst on clinical placement.

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RCH Values: Inclusive

At RCH we believe we achieve better results when we work together, communicate well, embrace diversity, and celebrate our successes together. Describe a time on clinical placement when you accommodated the individual needs of a patient, family member or colleague.

RCH Values: Courageous

RCH encourages its team members to always work with determination, ambition and confidence. Please describe a time when you have been faced with a challenging situation at work or on clinical placement. What resources did you utilise and what was your key learning from this situation?

Clinical Placements and Appraisals

CLINICAL PLACEMENTS AND APPRAISALS

Please provide the details of your **two most recent clinical placements** (regardless of setting, length or type), which must match the appraisal documentation provided with your application.

PLACEMENT 1

Year of study the placement completed	
Facility where the placement completed	
Clinical specialty/area of the placement	
Name and position of the person who completed the summative appraisal	

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CLINICAL PLACEMENTS AND APPRAISALS CONTINUED	
PLACEMENT 2	
Year of study the placement completed	
Facility where the placement completed	
Clinical specialty/area of the placement	
Name and position of the person who completed the summative appraisal	

References

Please provide details of **two clinical nursing referees who can describe your clinical practice** (i.e. a clinical teacher or preceptor) as per your PMCV registration.

REFERENCE 1 – CLINICAL REFERENCE	
Referee Name:	
Organisation:	
Job Title:	
Relationship to you (i.e. preceptor):	
Contact Email:	
Contact Number:	

REFERENCE 2 – CLINICAL REFERENCE	
Referee Name:	
Organisation:	
Job Title:	
Relationship to you (i.e. preceptor):	
Contact Email:	
Contact Number:	

Thank you for taking the time to apply for the Foundation of Paediatric Practice Program at The Royal Children's Hospital. Please upload this form via the RCH Careers job application.