



# GRANTA MEDICAL PRACTICES

Serving a population of 25,000 patients -  
Sawston Medical Centre and Linton Health Centre

Correspondence address:  
Granta Medical Practices  
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## SIXTH FORM STUDENT PLACEMENT REQUEST FORM

### ABOUT YOU

Name :

Address :

D.o.B :

Registered GP :

Current School :

Sex : MALE / FEMALE

**Please explain why you wish to apply for a GP experience placement**

**Please tell us about yourself as a person and your interests and goals**

**Have you had any experience with previous work experience or placements?**

### **Granta Medical Practices –**

- Sawston Medical Centre, London Road, Sawston, Cambridge CB22 3HU
- Linton Health Centre, Coles Lane, Linton, Cambridge CB21 4JS

Business Practice Manager: Mr Gerard Newnham  
please visit our web-site for a full list of GPs and staff

**Ideal dates for the placement**

**References**

**Please give the name and contact details of two responsible adults involved in your\_education that would be prepared to provide a reference if required**

**NAME:**

**Name:**

**Address:**

**Address:**

**Profession:**

**Profession:**

**Date:**

**Date:**