



طلب الانسحاب من البرنامج التأسيسي العام

Request for Withdrawal from the General Foundation Program (GFP)

1. Trainee's Full Name:	
2. GFP #:	
3. Level of Training: Rotation $\begin{bmatrix} & & & & & \\ & 1 & 2 & 3 & 4 & 5 \end{bmatrix}$]
4. Training Specialty:	
5. Start Date of Training:	
6. Reasons for Withdrawal from General Foundation Tra	ining Program:
Trainee's signature: Dat	te:
For the Education Committee of the GFP Use Only:	
Decision of the GFP Education Committee: Ag	ree 🗌 Disagree
The Education Committee's comments:	
Program Director's name:	
Program Director's signature: S	tamp:
Date:	

For the Wellness and Performance Section Use Only (if applicable):			
The Wellness and Performance Section has reviewed the withdrawal request and interviewed			
the trainee.	☐ Yes	□ No	
The Wellness and Performance Section comments will be sent in a separate report to the			
Education Committee:			
Head of Wellness and Performance Section:			
For GFP In-Charge Use Only:			
Decision of GFP In-Change:	☐ Agree	☐ Disagree	
GFP In-Change:			
Signature: Stamp:			
Date:			

Notes:

- The withdrawal request is valid for one (1) month after submission. If the trainee does not provide the needed requirements by OMSB, the request is considered invalid and will not be processed.
- The trainee will have to submit a new withdrawal form if he/she would still want to proceed with the request.