

North Cumbria GP Training Programme Peer Appraisal Form

Name	
Peer(s)	
Date	
Location	
Last year's PDP and progress towards	s completion
Summary of discussion	
Please include: Achievements, shared teaching ideas and signification	ant events
Deview of any feedback vectored and	
Review of any feedback received and	changes made as a result

Ne	xt year's PDP		