

# TJBCM Fellowship Programme: Neuro-oncology

## Drug Development Fellowship Guidelines

In partnership with

**ICR** The Institute of  
Cancer Research

*The* ROYAL MARSDEN  
NHS Foundation Trust



**NIHR** | National Institute for  
Health and Care Research

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## 1.0 Introduction

### 1.1 About the Tessa Jowell Brain Cancer Mission

The cure rates for brain tumours have remained low for many decades due to multiple complex issues. To improve outcomes, it is essential that scientists, who as experts in neurobiology, preclinical tumour modelling, genomics, drug discovery and development can have access to the best neurologists, neuropathologists, neurosurgeons, radiologists, clinical and medical oncologists so that the important challenges can be identified and targeted if we are eventually to be in the position to cure all patients with a brain tumour. Training for a career in neuro-oncology in the UK has a clear pathway for neurosurgeons but less so for the other disciplines.

Following Dame Tessa Jowell's call to action to improve treatment, care and research for people with brain tumours, the Tessa Jowell Brain Cancer Mission (TJBCM) was formed to work with existing stakeholders in the government, academic, NHS, Charity and patient and volunteer sectors to design and deliver a new national strategy for brain tumours. The Mission, an independent community interest company, serves as a convening body for these stakeholders, enabling them to work together to make a tangible change in brain tumour treatment and research.

TJBCM designs and delivers a national portfolio of eight transformational programmes focused on accelerating research, advancing precision medicine and novel treatments, improving care for today's patients, and connecting and training NHS staff. With the above initiatives, the Mission aims to significantly grow the brain tumour research community in the UK, train outstanding health care professionals and offer better care for patients in the UK.

As part of the connecting and training NHS staff strand, the Fellowship programme, led by Dr Sarah Jefferies, is tasked with designing training opportunities for healthcare professionals. The programme aims to create new attractive and rewarding career opportunities for aspiring scientists and clinicians in a challenging disease area, on the cusp of exciting and promising breakthroughs. The Tessa Jowell Fellowship is the perfect launchpad for emerging talent to build a clinical career dedicated to helping patients with complex needs while also leading on cutting-edge research and innovation

The TJBCM Fellowship Programme is a training programme for all medical specialties involved in the delivery of treatment, care and research for patients with brain tumours. While Fellows will apply for a fellowship in line with their speciality (e.g. oncology or neurology), it aims to provide a holistic overview of the multi-disciplinary management of brain tumours. Fellows will learn about the latest best practices in their own specialities as well as being encouraged to observe and learn from specialties across the pathway.

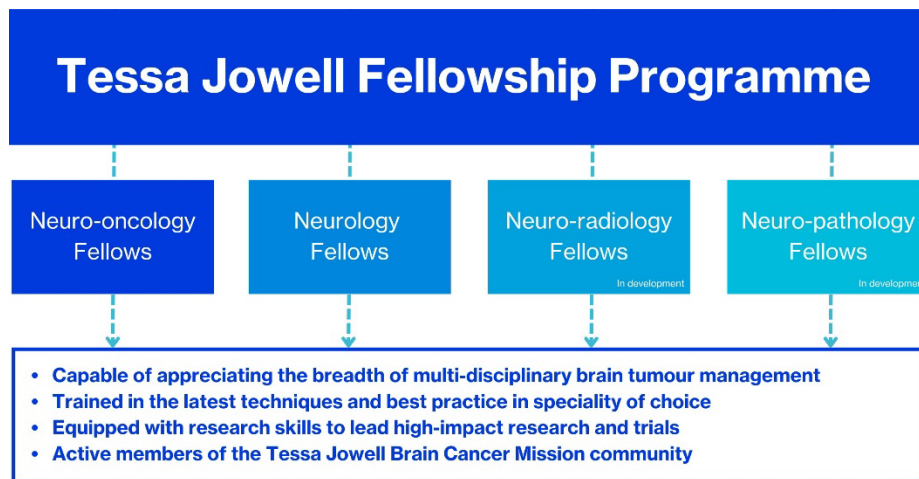


Fig.1 Tessa Jowell Fellowship Programme Structure

## 1.2. About the TJBCM Fellowships in Neuro-oncology

Brain tumours are the 9<sup>th</sup> most common cancer in the UK with 11,432 cases reported in 2015. Brain tumour incidence rates are projected to rise by 6% between 2014 and 2035 (Smittenaar *et al.*, 2016). Treatment options include surgery, radiotherapy, and chemotherapy, primarily delivered by neurosurgeons and oncologists, supported by neuroradiology, neuropathology and neurology. The neuro-oncology multi-disciplinary team (MDT) requires specialist input from clinicians dedicated to provide high-quality management of CNS tumours. In 2006 the NICE cancer service guideline for brain and CNS tumours highlighted the importance of specialist neurosurgical input in managing neuro-oncological surgery in which at least 50% of their clinical time is dedicated to management of CNS tumours (NICE(CSG10), 2006). Progress towards delivering world-class neuro-oncological cancer care in the UK requires training MDT members who have a deep appreciation of the treatment and management strategies applied throughout the team.

We anticipate in the coming decade the management of brain tumours will be increasingly complex. Surgical strategies are developing to refine the resection of tumours through intra-operative fluorescence and imaging. Radiotherapy will require advanced technical training to deliver stereotactic or proton radiotherapy. Tumour DNA sequencing resulting in subgrouping and the identification of actionable mutations will add to the complexity of understanding the implications of treatment and prognosis. Consequently, the application of new chemo- or immunotherapies in the context of early- and late-phase clinical trials will necessitate skilled clinicians in delivering comprehensive cancer care.

The Tessa Jowell Fellowships, hosted in collaboration with Tessa Jowell Centres of Excellence (TJCE), are designed to support clinicians to address the needs of the future of neuro-oncology. The 12-month funded Fellowships aim to train highly skilled clinicians that are capable of appreciating the breadth of comprehensive brain tumour management and can integrate knowledge and experience in personalizing and optimising cancer care.

The intention is for the Fellow to gain experience with the ultimate objective of leading high impact practice changing neuro-oncology clinical trials in the future as a Chief Investigator.

This particular fellowship is for a dedicate Neuro-Oncology Clinical Fellow within the Drug Development Unit at the Institute of Cancer Research and The Royal Marsden.

1. Department of Health and Social Care Task and Finish Working Group on Brain Tumour Research (2018) *Report of the Task and Finish Working Group on Brain Tumour Research*  
[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/683217/Brain\\_tumour\\_research\\_-\\_task\\_and\\_finish\\_working\\_group\\_report.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/683217/Brain_tumour_research_-_task_and_finish_working_group_report.pdf)
2. Smittenaar, C., Petersen, K., Stewart, K. et al. Cancer incidence and mortality projections in the UK until 2035. *Br J Cancer* 115, 1147–1155 (2016).  
<https://doi.org/10.1038/bjc.2016.304>
3. National Institute for Health and Care Excellence. (2006). Improving outcomes for people with brain and other CNS tumours. NICE Clinical Guidelines, No. 56. <https://www.nice.org.uk/guidance/csg10>

### 1.3 About The Drug Development Unit at Institute of Cancer Research and The Royal Marsden

#### ***The Institute of Cancer Research***

The ICR is one of the world’s most influential cancer research institutes with an outstanding record of achievement dating back more than 100 years. The scientists at the ICR have contributed to identifying several cancer genes, discovered multiple practice changing cancer drugs and have developed precision therapies. Together with our hospital partner The Royal Marsden (RM) , we are rated in the top four centres for cancer research and treatment worldwide. The ICR was ranked first in the UK for its research in biological sciences in a combined assessment of research quality, impact and environment; and overall, second in the UK among all higher Education institutions in REF 2021 analysis.

As an academic institute, ICR is a college of the University of London and has a charitable status. The institute operates with funding support from grants, partner organisations, charities, donors, industry partners and the general public. The ICR has more than 1,000 staff, researchers and students across three sites – in Chelsea and Sutton. Further Information about ICR can be obtained via : <https://www.icr.ac.uk/about-us/how-we-are-structured>

#### ***The Royal Marsden***

The Royal Marsden is recognised worldwide for the quality of its cancer services. The Trust’s strategic aim is to achieve excellence in cancer treatment and diagnosis, through partnership and collaboration. The prime purpose of the Trust is the provision of state of the art cancer services as well as enabling research into the development of improved methods of prevention, diagnosis and treatment of cancer. Its other main purpose is teaching and the dissemination of knowledge both nationally and internationally. As a leading Cancer Centre, the Trust has close working relationships with many Cancer Units and other Cancer Centres. Predominantly the Trust’s workload is from within the South West and West London Cancer Networks but the Trust is unique in having a high out-of-area referral rate for rare cancers, recurrent disease and clinical trials. Further information about RM can be obtained via : <https://www.royalmarsden.nhs.uk/about-royal-marsden/how-we-run-ourselves>

#### ***The Drug Development Unit***

The scope of activities on the Drug Development Unit has significantly increased in recent years. There are currently 6 consultants/principal investigators involved in early clinical trials, Prof Johann de Bono, Prof Udai Banerji, Dr Juanita Lopez, Dr Anna Minchom, Dr Adam Sharp and Dr Alec Paschalis. A team of 9-10 research fellows are involved in both preclinical

and clinical aspects of individual studies and the work is supported by a team of 35 Research Nurses, 10 Data Managers, 10 Study Managers, a regulatory team and research support staff. Over 1200 patients per year, with a wide range of malignancies, are referred for Phase I studies. This includes patients with common cancers refractory to standard treatments, as well as patients with rare cancers of unmet need.

Over the last 5 years, there have been more than 200 referrals for patients with relapsed brain tumours, with pre-screening for participation onto clinical trials and recruitment of nearly 50 onto early phase trials.

## 2.0 Neuro-oncology Fellowship structure

### 2.1 Eligibility

TJBCM Fellowships are for applicants who are near completion of training in clinical or medical oncology. Applicants will need to be able to demonstrate that they meet the range of skills and experience outlined in the person specification (appendix 1).

### 2.2 Aims and Objectives

*The aims of the Tessa Jowell Fellowship Programme are to:*

- Cultivate the future leaders in neuro-oncology in the UK;
- Provide fellows with an extensive understanding and clinical experience of working with novel targeted therapies in neuro-oncology.
- Equip fellows with the necessary research skills to lead high-impact and practice-changing neuro-oncology clinical trials in the future;
- Provide supervised training in the inpatient and outpatient practice of neuro-oncology, building a comprehensive understanding of the role of associated disciplines in holistic brain tumour management.

#### *Objectives of the Tessa Jowell Drug Development Fellowship*

The objective of the Tessa Jowell Drug Development Unit Fellowship is to offer the opportunity for a medical oncology (or clinical oncology) trainee who wishes to gain specific experience in early clinical trials with a specific focus on neuro-oncology. The post provides:

- extensive clinical experience working with novel targeted therapies in oncology (clinics, ward work and consultant ward rounds)
- experience in all aspects of Phase 1 trial conduct from protocol development, trial setup, trial conduct in line with GCP, clinical and administrative management of trials, decision making on dose escalation, correlation of clinical and laboratory findings (pharmacokinetics, pharmacodynamics). The majority of the anti-cancer drugs being explored are often at a very early first in human stage and span a breadth of immune-oncology, DNA damage-response therapies, targeted therapies as well as novel anti-cancer strategies.
- Opportunities to be involved in projects leading to publication of manuscripts, and trial presentation at national and international meetings. For suitable candidates, there is the option to develop grant applications and translational project proposals for higher degrees (MD/PhD). Further information can be obtained from the past



DDU fellows webpage on <https://www.icr.ac.uk/our-research/research-divisions/division-of-clinical-studies/the-adult-drug-development-unit-at-the-icr-and-the-rm/training-programmes/testimonials>

### *Interactions with other disciplines*

To ensure a holistic understanding of brain tumour management, Fellows will be asked develop familiarity and an understanding of other key multi-disciplinary professionals involved in the delivery of brain tumour treatment and care including:

- To develop an appreciation of surgical decision-making for brain tumours, advanced techniques, and the management of surgical complications.
- To gain understanding of neuropathology and molecular genomics
- To gain and understanding of the management of neurological symptoms and sequelae of brain tumours.
- To appreciate the role of neuroimaging in assessing brain tumours and the role of novel imaging modalities.

### 2.3 Structure

The fellowship is focused on providing extensive clinical experience working with novel targeted therapies as well as experience in all aspects of Phase 1 trial conduct, over twelve months. Importance is placed on the longitudinal experience of managing brain tumours in these settings, in which clinical oncology trainees usually have approximately 4-months and medical oncology trainees have zero experience within a standard training programme. Fellows are further encouraged to gain experience and understanding of the multi-disciplinary approach to brain tumour management, with the opportunity to spend one day a week observing and learning from the various disciplines involved in brain tumour management.

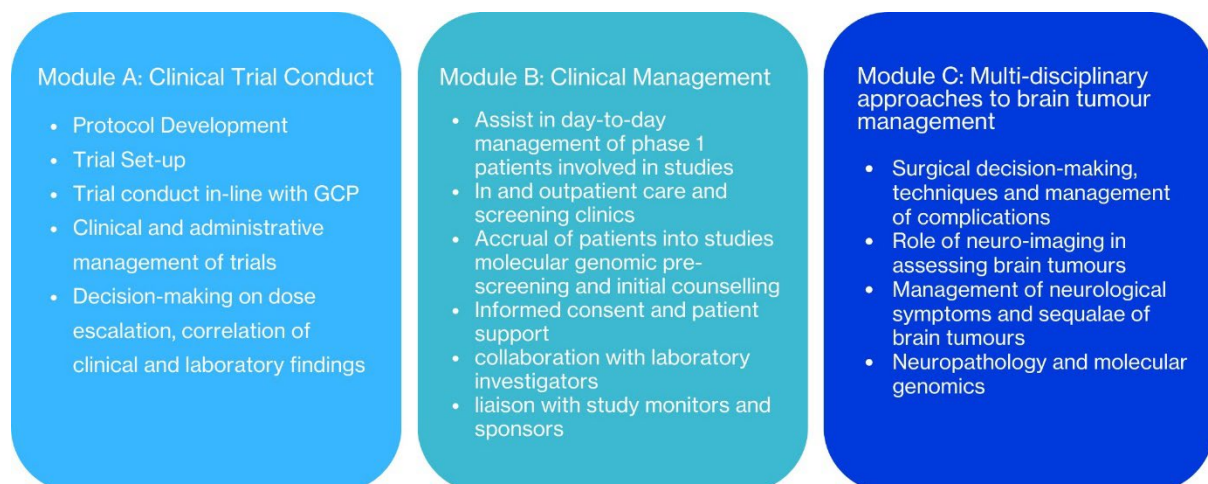


Fig.2 Fellowship curriculum modules

#### **a. What educational strategies will be adopted?**

The educational strategy applied with trainee-centred integrated learning. The fellowship will be planned to deliver bespoke modules of training that address the educational needs

of the trainee. The individual goals of the trainee will be agreed with the host supervisor and the programme lead prior to commencement.

**b. What teaching methods will be used?**

Training will be centred around work-based learning methods, such as reflection, role-modelling, mentoring, interprofessional interactions, and opportunistic clinic or 'bed-side' learning.

**c. How will assessments be carried out?**

*Feedback*

A short written report will be requested from the Fellow and the host supervisor at the end of each quarter of the fellowship. This will be reviewed by the programme lead, the TJBCM and colleagues at host institution to assess satisfaction and engagement with the fellowship.

*Behavioural change*

By the end of the Fellowship the trainee should be applying their learning. Either the application of new techniques or integrating obtained knowledge into their clinical practice.

*Impact*

The impact of the Fellowship will occur in two phases. Following the completion of the fellowship and attainment of CCT, it is anticipated the trainee will begin a substantive post treating brain tumours in the UK with at least a 50% of clinical workload. Long term, fellows will support the local delivery of high-quality neuro-oncological care and develop national and international roles in brain tumour management.

**d. What educational environment or climate will be fostered?**

Work-based learning has learning embedded into the everyday practice, routines and cultures of the TJCE. Learning is supported by more knowledgeable and experienced colleagues, alongside the wider health care team. Consequently, engaged mentor and module leads are vital in identifying development opportunities. TJCE should be nationally recognized in one or two module areas to promote excellence for the trainee.

**e. What external opportunities will be available?**

Fellows will be encouraged to attend external meetings such as BNOS, EANO, CRUK and the Cambridge Training Bootcamp. There will also be opportunities to attend NIHR sponsored events as well as TJBCM-led meetings. Fellows may explore and suggest other external opportunities in line with their interest and fellowship budget.

## 2.4 Host Institution

The Royal Marsden has two sites - one based in Chelsea, London, and one based in Sutton, Surrey. The post holder will be based in Sutton.

**a. Tessa Jowell Centre of Excellence Network**

**In 2020, the Institute of Cancer Research in partnership with The Royal Marsden NHS Foundation Trust, St George's University Hospital NHS Foundation Trust and Royal Surrey NHS Trust obtained the Tessa Jowell Centre of Excellence designation.**



The Tessa Jowell Centre of Excellence designation serves as national recognition of a centre's staff going above and beyond for patients with brain tumours. For patients, designation creates transparency and instils confidence that they will receive the highest standard of care under the NHS.

Tessa Jowell Centres of Excellence are centres which have obtained designation status following a review by the Tessa Jowell Brain Cancer Mission against the Tessa Jowell Centre of Excellence standards. Each participating centre has demonstrated an active commitment to service development and improvement and will provide the level of training outlined in this document. Additionally, they will demonstrate the ability to promote the overall TJBCM fellowship goals and support educational activities.

Applicants may wish to explore observership opportunities at other institutions to provide additional experience which cannot be obtained at the primary site (e.g., an international institution or institutions with specific expertise or infrastructure such as proton beam therapy)

## 2.5 Fellowship Funding

The full 1-year Tessa Jowell Fellowship award is between £81,000- £97,000, dependant on the seniority of the applicant. This consists of:

- Full salary cost
- Employment oncost
- Fellowship travel and conference bursary
- TJBCM administrative costs

The Tessa Jowell Fellowship is co-funded as following:

- National Institute of Health Research which funds 50% of the fellowship, commensurate to the research component.
- The Institute of Cancer Research which funds the remaining 50% of the fellowship

## 2.6 The Applicant

The TJBCM Fellowships are aimed at individuals planning an academic career in neuro-oncology. The application will expect you to demonstrate:

- Your current interest, relevant experience and potential impact to their career development at the time of applying
- Your future research ambitions that we expect you to develop during the fellowship
- Your wider supporting and enabling skills at the time of applying which will help you deliver on your future, Neuro-Oncology research ambitions

The TJBCM training programme will use these factors to make the award decisions. See Appendix 1 for detailed person specifications.

### 3.0 The Faculty

Led by the Programme Lead and with support of the TJBCM, The Fellowship Core Faculty sets the curriculum, undertakes the selection process for the fellowships and ensures centres are able to support the required aspects of training in neuro-oncology. TJBCM is responsible for the general administration and expansion of the fellowship programme.

The faculty additionally works with leading experts who provide advice on specialty-specific aspects of the curriculum and support selections of candidates in line with their specialty:

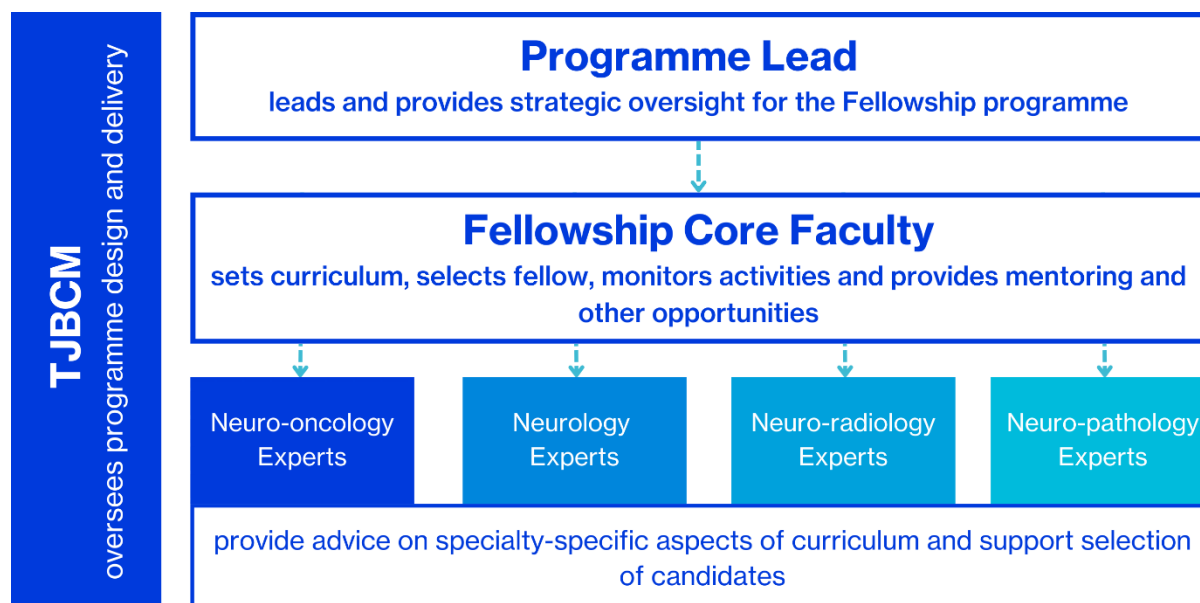


Fig.3 Summary of roles and responsibilities of Fellowship committee

The faculty consists of:

**Programme lead** – Dr Sarah Jefferies

The Programme Lead is accountable for the operation of the fellowship program and fulfils the following:

- possesses requisite specialty expertise such as demonstrated evidence of experience in the field of neuro-oncology, as well as documented educational and administrative abilities and experience in his or her field
- has significant prior experience in the training of in neuro-oncology
- reports on the training program to the TJBCM committee

#### Core faculty

The Faculty oversees and organises the activities of the educational programme as well as the module content. It is responsible for the selection of the fellow, jointly monitors the fellowship training with the Programme Lead and may offer wider opportunities for networking, mentoring and other activities.

**Medical oncology** – Dr Juanita Lopez

**Clinical Oncology** – Prof. Anthony Chalmers, Dr Faye Robertson, Dr Gillian Whitfield, Dr Cressida Lorimer

**Neurosurgery** – Mr Michael Jenkinson

**Neuroradiology** – Dr Gerry Thompson

**Neurology** – Dr Fiona McKeivitt

**Neuropathology** – Prof Kathreena Kurian

**Director of Services and Policy Brains Trust** – Dr Helen Bulbeck

**Patient Representative** – Peter Realf

**NIHR Representative** – Rachel Dwyer

**Host Institution Representative** – Dr Liam Welsh

## 4.0 The Application Process

The TJBCM Fellowships are aimed at individuals with an interest in a career in neuro-oncology. The application will expect you to demonstrate:

- Evidence of developing independent research ideas
- Evidence of a start to making important research contributions in neuro-oncology or wider oncology
- An awareness of research in other fields/disciplines and how your own research could benefit from working across disciplines
- Identified appropriate career development opportunities
- Plans to develop relevant skills and knowledge to drive the development of your own cancer research ideas
- Evidence of balancing other commitments e.g. clinical, teaching, supervision activities or other commitments.
- Evidence of a start to developing leadership skills
- Effective communication skills across different audiences

Part-time working will be taken into consideration by our training programme.

### Application Process

The 2024 TJ fellowship recruitment window opens on **May 31st 2024** and closes on **July 5<sup>th</sup> 2024**. The Recruitment Process will be managed via The ICR. Please visit <https://jobs.icr.ac.uk/vacancies/vacancy-search-results.aspx> and apply via the portals in this link.

Shortlisted candidates will be invited to interview with the TJ Fellowship committee on **July 16 2024**.

## **5.0 Confidentiality and data protection**

All employees of The Royal Marsden NHS Foundation Trust must not, without prior permission, disclose any information regarding patients or staff (please also see the Trust's policy on Whistleblowing). In instances where it is known that a member of staff has communicated information to unauthorised persons, those staff will be liable to dismissal. Moreover, the Data Protection Act 1998 also renders an individual liable for prosecution in the event of unauthorised disclosure of information.

## **6.0 General Data Protection Regulation**

You will familiarise yourself with the Trust's data protection policy which sets out its obligations under the General Data Protection Regulation and all other data protection legislation. You must comply with the Trust's data protection policy at all times and you agree that you will only access the systems, databases or networks to which you have been given authorisation. The Trust will consider a breach of its data protection policy by you to be a disciplinary matter which may lead to disciplinary action up to and including summary dismissal. You should also be aware that you could be criminally liable if you disclose personal data outside the Trust's policies and procedures. If you have any queries about your responsibilities in respect of data protection you should contact the Trust's Data Protection Officer.

You will also be required to familiarise yourself with the Tessa Jowell Brain Cancer Mission's data protection policy, which sets out its obligations under the General Data Protection Regulation and all other data protection legislation. You must comply with the Mission's data protection policy at all times.

## **7.0 Safeguarding children and vulnerable adults**

All staff must be familiar with and adhere to the Trust's child protection and safeguarding adult policies and procedures. All staff are required to attend child protection and safeguarding adults awareness training, additional training and supervision regarding child protection relevant to their position and role.

## **8.0 Health and safety**

All staff are required to make positive efforts to maintain their own personal safety and that of others by taking reasonable care, carrying out requirements of the law whilst following recognised codes of practice and Trust policies on health and safety.

## **9.0 Customer service excellence**

All staff are required to support the Trust's commitment to developing and delivering excellent customer-focused service by treating patients, their families, friends, carers and staff with professionalism, respect and dignity.

## **10.0 Emergency planning**

In accordance with the Trust's responsibilities under the Civil Contingencies Act 2004 all staff are required to undertake work and alternative duties as reasonably directed at variable locations in the event of and for the duration of a significant internal incident, major incident or pandemic.

## **11.0 Equality and diversity policy**

The Royal Marsden NHS Foundation Trust and the Tessa Jowell Brain Cancer Mission are committed to eliminating all forms of discrimination on the grounds of age, disability, gender reassignment, marriage / civil partnership, pregnancy / maternity, race, religion or belief, sex and sexual orientation.

## **12.0 No smoking policy**

It is the policy of the Trust to promote health. Smoking is actively discouraged and is prohibited in most areas of the Hospital, including offices, with the exception of designated smoking areas on both sites.

## **13.0 Review of this job description**

This job description is intended as an outline of the general areas of activity. It will be amended in the light of the changing needs of the organization, in which case it will be reviewed in conjunction with the post holder.

## **14.0. Terms and conditions of employment**

This post is exempt from the Rehabilitation of Offenders Act 1974, meaning that any criminal conviction must be made known at the time of application.

## Appendix 1 – Person Specification

Education/Qualifications	How measured <i>(application form, interview, test, presentation, references, occupational health)</i>
<p><b><u>Essential</u></b></p> <ul style="list-style-type: none"> <li>• Basic medical degree and evidence of suitability for higher medical training. Broad knowledge of general internal medicine with MRCP or equivalent and experience in the treatment of cancer patients.</li> <li>• Applicants should be near to gaining their certificate of completion of training in medical or clinical oncology</li> <li>• Eligible for full GMC registration.</li> </ul> <p><b><u>Desirable</u></b></p> <ul style="list-style-type: none"> <li>• Broad knowledge of medical oncology including knowledge concerning standard chemotherapy regimens, the drugs and their side effects.</li> <li>• Evidence of commitment to neuro-oncology within own speciality</li> <li>• Intercalated honours degree and/or additional qualifications e.g. MSc/PhD etc.</li> </ul>	<p>Application form</p>
Experience	
<p><b><u>Essential</u></b></p> <ul style="list-style-type: none"> <li>• Broad experience of management of patients with full range of cancer types, including brain cancer (internal referrals)</li> <li>• Demonstration of acquisition of neuro-oncology-related knowledge and skills</li> <li>• Demonstration of the potential for scientific independence and the ability to contribute to a research team</li> <li>• Potential to become leader in neuro-oncology</li> </ul> <p><b><u>Desirable</u></b></p> <ul style="list-style-type: none"> <li>• Experience in clinical trials in cancer chemotherapy, including some aspects of early drug development</li> </ul>	<p>Application form/interview</p>
Skills/Abilities/Knowledge	



<p><b><u>Essential</u></b></p> <ul style="list-style-type: none"> <li>• Experience in the management of acute medical emergencies and, practical interventions e.g. chest and ascitic drains, central lines etc. Experience in general oncology management including treatment of oncological emergencies and cancer chemotherapy.</li> <li>• Evidence of team working skills</li> <li>• Evidence of leadership potential</li> </ul> <p><b><u>Desirable</u></b></p> <ul style="list-style-type: none"> <li>• It would be helpful for the applicant to have some experience and knowledge of cancer clinical trial methodology including the conduct of early trials.</li> </ul>	<p>Application form/interview</p>
<p><b>Educational and Personal Aspects</b></p>	
<p><b><u>Essential</u></b></p> <ul style="list-style-type: none"> <li>• Demonstration of understanding, and commitment to, a career in neuro-oncology</li> <li>• Indication of medium and long-term career goals</li> <li>• Demonstration of educational reasons for applying for the TJ fellowship</li> </ul>	<p>Application form/interview</p>