

CV, GMC Online, filenames and application control

Translate a complex career into a consistent application, navigable evidence files and a controlled GMC Online submission.

- ✓ 18 min reading
- ✓ Full teaching, practical next steps and reflection
- ✓ Six practice questions with answers and explanations
- ✓ Complete source list and jurisdiction notes

Prepared for SAS, locally employed and other UK doctors

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Using this module

Independent education

This is general professional information, not individual clinical, legal, employment, immigration, regulatory, tax or pensions advice. Current official instructions and the circumstances of the individual case remain controlling. Practice scores do not establish professional competence or accreditation.

The short answer

The application form, CV, evidence map and uploaded documents must tell the same factual story. Open the application only when the evidence plan is mature: the GMC currently allows 24 months to submit once opened. Use stable filenames, exact references and final-version control, then complete a line-by-line reconciliation before payment.

Three next actions

- Reconcile every role, date, gap, qualification and registration entry across the CV and GMC Online.
- Apply a filename and version convention before uploading evidence.
- Run a final application-to-index-to-document audit with a second reviewer.

Learning objectives

- Prepare a Portfolio Pathway CV that explains scope and chronology.
- Use the 24-month application window safely.
- Control uploads, naming and consistency.

Open the application deliberately

The GMC states that an opened application must currently be submitted within 24 months. Evidence collection can take substantial time, so prepare the curriculum map, secure long-lead opportunities and understand the route before starting the clock.

Create a submission timetable with internal dates for final assessments, references, verification, translations, independent review, payment and contingency. The 24-month maximum is not a recommended project duration or an extension entitlement.

- Prepare before opening.
- Use internal milestones.
- Build contingency before the deadline.

Use the CV as a scope and chronology document

The CV should make employment, training, qualifications, registration, scope, responsibilities, achievements and career chronology understandable. For each significant post, describe the service, patient group, clinical level, supervision, on-call duties and non-clinical responsibilities rather than relying on a local job title.

Explain career transitions and legitimate gaps factually without unnecessary sensitive detail. Dates and titles must match the application and evidence. The CV is not a substitute for mapped proof.

- Describe work, not only titles.
- Reconcile dates and scope.
- Protect unnecessary personal information.

Use stable file names and references

Choose a predictable pattern such as outcome, evidence type, date and short description. Avoid 'final', 'final2' and unexplained abbreviations. Keep an immutable final submission copy separate from working drafts.

The evidence map should cite the exact file and page or internal section. Large PDFs need bookmarks or clear tables of contents where the format permits. Follow GMC size, type and upload instructions.

- Use stable unique names.
- Cite exact pages.
- Separate working and submitted versions.

Answer GMC Online accurately

Read every field and help note. Enter qualifications, registration history, employment and declarations accurately. If uncertain about how a history item should be recorded, obtain GMC advice rather than omitting it or making an unsupported interpretation.

Draft longer answers outside the system using secure methods, then check formatting after entry. Keep a final copy or permitted record of what was submitted, including declarations and evidence index.

- Use the field guidance.
- Seek clarification for ambiguity.

- Retain a final submission record.

Run a line-by-line consistency audit

Compare the CV, GMC Online entries, references, certificates, evidence map and documents. Look for conflicting job dates, titles, scopes, training claims, names and unexplained gaps. Distinguish a genuine discrepancy from a harmless formatting difference.

Correct errors only through legitimate source or application processes. Record explanations for differences that cannot or should not be altered. Never ask a referee to align wording with a claim they cannot support.

- Cross-check every source.
- Resolve rather than conceal differences.
- Preserve document integrity.

Freeze and review the final set

Before payment, freeze uploads and run three reviews: curriculum completeness, administrative correctness and confidentiality/provenance. Confirm that links, page references and readable scans work. Ask a reviewer to navigate without verbal explanation.

Record the GMC fee and refund or withdrawal implications from the current regulations. At 7 September 2026 the published Portfolio application fee is £1,974, but applicants must verify the live fee before paying.

- Freeze a final candidate version.
- Test navigation and readability.
- Verify the current fee before payment.

Common mistake

Avoid this

Treating GMC Online as a clerical form rather than part of the evidence can create inconsistencies that undermine otherwise strong portfolio material.

Pause and reflect

If an evaluator compared your CV, references and application history today, which discrepancy would they notice first?

Takeaways

- Open the application when the plan is mature, not as the first planning step.
- The CV and online form must accurately explain scope and chronology.
- Stable files, exact references and a submission freeze reduce preventable errors.

Knowledge check

Choose one best answer. These practice questions support reflection; they do not assess a real case or confer accreditation. Answer positions match the browser edition.

1. A doctor has major unarranged clinical gaps. Should they open the application to feel committed?

- A. Yes, because the GMC will arrange placements
- B. It makes no difference
- C. Usually not until the plan and long-lead opportunities are secure
- D. Yes, and rely on obtaining an extension later if the gaps remain unarranged

2. What is most useful beneath an unfamiliar overseas job title?

- A. A concise description of scope, responsibility, supervision and service
- B. A claim that it equals consultant level
- C. Only the hospital logo
- D. No explanation

3. Which filename is most useful?

- A. evidence.pdf
- B. scan0004.pdf
- C. CIP3_CbD_2026-05_complex-discharge_v1.pdf
- D. final-new2.pdf

4. The applicant is unsure whether an historic regulator matter must be declared. What is safest?

- A. Use a vague CV note only
- B. Leave it out
- C. Ask a friend to decide
- D. Ask the GMC and relevant adviser before submission

5. A reference gives a different employment start month from the CV. What should happen?

- A. Remove the inconsistent reference rather than establish the correct employment date
- B. Change the source document personally
- C. Assume no one will notice
- D. Check authoritative records and correct or explain the discrepancy

6. What should happen immediately before submission?

- A. A bulk upload of all remaining drafts
- B. Deletion of working records
- C. A promise from the supporter
- D. A controlled completeness, accuracy and confidentiality audit

Answers and explanations

1. C — Usually not until the plan and long-lead opportunities are secure

Usually not until the plan and long-lead opportunities are secure This follows the principle explained in “Open the application deliberately”.

Re-read “Open the application deliberately” and write down the evidence or decision you would need before acting.

2. A — A concise description of scope, responsibility, supervision and service

A concise description of scope, responsibility, supervision and service This follows the principle explained in “Use the CV as a scope and chronology document”.

Re-read “Use the CV as a scope and chronology document” and write down the evidence or decision you would need before acting.

3. C — CIP3_CbD_2026-05_complex-discharge_v1.pdf

CIP3_CbD_2026-05_complex-discharge_v1.pdf This follows the principle explained in “Use stable file names and references”.

Re-read “Use stable file names and references” and write down the evidence or decision you would need before acting.

4. D — Ask the GMC and relevant adviser before submission

Ask the GMC and relevant adviser before submission This follows the principle explained in “Answer GMC Online accurately”.

Re-read “Answer GMC Online accurately” and write down the evidence or decision you would need before acting.

5. D — Check authoritative records and correct or explain the discrepancy

Check authoritative records and correct or explain the discrepancy This follows the principle explained in “Run a line-by-line consistency audit”.

Re-read “Run a line-by-line consistency audit” and write down the evidence or decision you would need before acting.

6. D — A controlled completeness, accuracy and confidentiality audit

A controlled completeness, accuracy and confidentiality audit This follows the principle explained in “Freeze and review the final set”.

Re-read “Freeze and review the final set” and write down the evidence or decision you would need before acting.

Official and professional sources

Confirm the current source version and applicable nation, contract, scheme or specialty. A source list is not a statement that every rule applies to every reader.

GMC: [specialist/GP registration overview and application route finder](#)

UK · <https://www.gmc-uk.org/registration-and-licensing/join-our-registers/applying-for-specialist-or-gp-registration>

GMC specialist registration fees from 1 April 2026

UK ·

https://www.gmc-uk.org/cdn/documents/general-medical-council-specialist-fee-regulations---effective-1-april-2026_pdf-113184035.pdf

BMA: [Portfolio pathway programme](#)

UK · <https://www.bma.org.uk/media/s0gpek3u/bma-february-2025-portfolio-pathway-programme.pdf>

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