

Student Suitability Declaration Form for BSc (Hons) Occupational Therapy

Please complete this form fully, prior to attending the interview. If you attend an interview and the form has not been submitted, we will be unable to confirm any offer until it has been received and the information reviewed.

| | | | |
|------------------------------|--|--------------------------------|--|
| Full name | | Date of Birth | |
| Contact number (Home) | | Contact number (Mobile) | |
| Email address | | | |

| Previous name(s) and address(es) from the last five years | | |
|---|---------|--------------------------|
| NAME | ADDRESS | DATE mm/yy (From and to) |
| | | |
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Have you ever attended an Occupational Therapy degree course before? YES NO

If yes, please provide further details below including the institution, dates of attendance and reason for leaving.

The Health and Care Professions Council (HCPC) requires that candidates who are being admitted to the course have undertaken:

- a) enhanced criminal conviction checks by the DBS (Disclosure and Barring Service) or an equivalent international body; and
- b) a health check, usually by means of a self-declaration, but with an additional statement from a GP or consultant where necessary about specific events.

Failure to provide accurate information may lead to withdrawal from the course.

GUIDANCE NOTES FOR ENHANCED CRIMINAL CONVICTION CHECKS DECLARATION FORM

1. Every candidate invited to attend for interview must complete this form whether they have a previous conviction or not. Previous convictions include warnings, reprimands and some driving offences.
2. For candidates who have previously been convicted of a criminal offence, or disclose a pending court appearance or current charge:
 - a) Any details that you provide will be treated in the strictest confidence and will not automatically exclude you from being considered for this or any course.
 - b) We may wish to ask you about any disclosures during your individual interview.
3. The amendments to the Rehabilitation of Offenders Act 1974 provide that certain spent convictions and cautions are 'protected' and are not subject to disclosure to employers, and cannot be taken into account. For details see [DBS \(Disclosure and Barring Service\) website](#).
4. You must provide information on convictions within the armed services, outside the United Kingdom.

Please note:

- Having a criminal conviction does not automatically bar you from entering the course but it does depend on the nature of the offence and when it occurred
- If information later comes to light that is not declared now, this may lead to withdrawal from the course
- We will need to be informed of any matters arising after the date of this declaration (work related disciplinary matters and protection of children and people who use services or criminal charges/caution)

I have read and understood this:

| | | | |
|------------------|--|-------------|--|
| Signature | | Date | |
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PART A: Court and Police Matters

Occupational Therapy is exempted from certain provisions of the Rehabilitation of Offenders Act 1974 (as amended from time to time), and information about all previous convictions, cautions, warnings or ongoing police matters must be provided (there are some exceptions – for more information refer to the DBS website or consult the interview team). A conviction does not automatically debar applicants from the course and we will seek further information about the circumstances to make an informed and considered judgement about a candidate's suitability in such instances.

| a) Have you ever been convicted of a criminal offence? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | |
|---|------------------------------|--------------------------------|------------------|
| b) Do you have a court appearance pending? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | |
| c) Are you awaiting an outcome of any criminal offence? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | |
| d) Have you ever received a fixed penalty notice (excluding those for speeding)? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | |
| e) Have you ever received a caution or reprimand administered by the police? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | |
| f) Have you ever been subject to a conditional caution? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | |
| g) Have you ever been bound over to keep the peace for a period? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | |
| h) Have you received an Anti-Social Behaviour Order (ASBO) made by any court? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | |
| i) Have you ever been subject to an injunction made by a court in any proceedings? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | |
| j) Have you ever been disqualified from working with children by an order under the Criminal Justice and Courts Act 2000? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | |
| If you answered YES to any question above, please supply the following details: | | | |
| DATE | COURT | FULL DETAILS OF OFFENCE/ORDERS | SENTENCE/OUTCOME |
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Failure to declare offence/s **other than those that are protected** will lead to withdrawal from the course.

PART B: Disciplinary record, unprofessional conduct, and notifiable listings

Members of the public who receive care are entitled to expect the highest standards of reliability and integrity from our students and it is imperative that the qualifying award is held only by those whose personal and professional conduct merits this trust. If you answer 'YES' to any of the questions, you will be contacted by the Course Leader who will seek further information about your circumstances and may make other relevant inquiries to colleges and former employers to enable an informed decision to be made about your application. At this stage, you can make further representations in writing and you may be invited to discuss your application directly with the Admissions tutor or the Course Leader.

DISCIPLINARY MATTERS

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|---|------------------------------|-----------------------------|
| a) Have you ever had a disciplinary finding against you? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| b) Are you currently the subject of any disciplinary investigation? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| c) Have you ever had your employment terminated for unprofessional behaviour or misconduct? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| d) Have you ever left an organisation before the outcome of a disciplinary investigation and/or any other type of investigation was known? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| e) Have you ever been suspended or disqualified from any professional training programme? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| f) Have you ever been suspended or reregistered for professional misconduct by any other regulatory, licensing, competent or professional body? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| If you answered YES to any question above, you must provide us with more details below. | | |

PART C: Protection of children and people who use services

We need to know whether children in your personal care have been subject to a child protection plan, placed in care or whether you have lived in a household as an adult where children have been placed in care. We also need to know if you have ever been involved in an adult safeguarding investigation. These circumstances do not automatically debar you from study, but we need to make an informed judgement about what risks, if any, they may pose for you and for other people.

If you answer 'YES' to any of the questions, you will be contacted by the Course Leader who will seek further information about your circumstances and may make other inquiries to enable an informed decision to be made about your application. At this stage, you can make further representations in writing, and you may be invited to discuss your application directly with the admissions tutor or the Course leader.

| | | |
|--|------------------------------|-----------------------------|
| Have you ever been, or are you currently, subject to one of the orders stated below? | | |
| a) Protection of Vulnerable Adults (POVA) list | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| b) Protection of Children Act (POCA) list | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| c) Section 142 of the Education Action (2000) (formerly list 99) | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| d) Have you ever been ordered to comply with registration requirements under the Sexual Offences Act 2003 or the Crime and Disorder Act 1998? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| e) Have you ever been ordered to comply with notification requirements under the Sexual Offences Act 2003 or been the subject of an order under Part 2 of that Act (including a Notification Order or a Sexual Offences Prevention Order)? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| f) Has any child been removed, temporarily or permanently from your care as a result of care proceedings? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| g) Have any of your children been subject to involvement from Social Services or been placed in care? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| h) Have you ever been involved in an adult safeguarding investigation? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| If you answered YES to any question above, you must provide us with more details below. | | |

UEL complies with the requirements of the Data Protection Act 1998, and the General Data Protection Regulation 2018, and all information disclosed will remain strictly confidential.

PART D: Personal health and circumstances

We need to ensure that students selected for this course have sufficient stamina to manage both the rigours of the training and the challenges of professional life. Successful completion of the course requires full participation at university and at practice learning placements. The practice element is often undertaken with people who are vulnerable, at risk, or whose capacity to manage their own affairs is temporarily or permanently impaired. Accordingly, the course is required to ensure that all students are capable of enduring the demands of training and do not present any threat to the safety of service users, or to themselves.

Please note: You are not required to make a declaration about health problems that do not impinge upon your capacity to study or practice, or that in the normal course of your duties, would not present a risk to others. If you do have health needs which are declared at the point of admission or during your course of studies the University will seek to ensure all reasonable adjustments are made in line with equality and diversity law. However, in accordance with the requirements of the Health and Care Professions Council (HCPC) standards must be maintained to protect the public and ensure safe and effective practice. The HCPC asks that course providers ensure that applicants accepted are in good physical and mental health. To this end, we at UEL, ask that candidates for our course to sign this declaration of good health. We may also ask for medical verification in relation to this declaration.

In the case of medical conditions, with your consent, further information may be sought from your doctor, or a medical consultant. We may also seek advice from our own medical and occupational health officers.

| | |
|----------------------------------|--|
| Doctor'(s) Name(s): | |
| Doctor'(s) Address: | |
| Doctor'(s) Contact Number (Tel): | |

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| Please detail any conditions that may affect you while studying: |
| I declare that I am of good health: physically and mentally. I consider myself currently able to withstand the academic and practical challenges of professional training. |

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|-----------|--|------|--|
| Signature | | Date | |
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PART E: Declarations

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| I certify that: | | | |
| <p>I have read the Guidance Notes and have not withheld information that may affect my application for appointment. I agree to inform the University of any matters relating to criminal charges/convictions, work related disciplinary matters and protection of children and people who use services that arise after the date of this declaration. I understand that false information or omissions will lead to dismissal. Information supplied above may be verified by the University.</p> | | | |
| <p>I consent to the information which I have provided on this form being used by University of East London in the decision-making process. I understand that by applying for this course I have to apply for an enhanced DBS (Disclosure and Barring Service) certificate in relation to children and adults, and I agree to do so as soon as I accept an offer of a place.</p> | | | |
| Signature | | Date | |

Attendance declaration

I understand that the course is a full-time course and I need to be available to attend lectures and practice placements (shifts encompassing weekdays, nights and weekends), as attendance at both are essential. I understand that this will mean I need to make myself available for lectures from 9am to 6pm, Mondays to Fridays and will ensure that I make all the necessary arrangements both in terms of travel and any other personal commitments prior to the start of the course.

| | | | |
|------------------|--|-------------|--|
| Signature | | Date | |
|------------------|--|-------------|--|

IT Skills Declaration

Candidates are required to have basic IT skills, including word processing, internet browsing, online platforms like Microsoft Teams and use of email. It is possible to acquire these skills in a number of ways and it is not necessary to have acquired them through formal certificated qualifications. You do, however, need to confirm that you have them and to state how you acquired them.

| | | | |
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| I can confirm that I am able to use basic IT facilities. I acquired these skills by: | | | |
| | | | |
| Signature | | Date | |