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| Student's Name: |
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**STUDENT SELF-DECLARATION**

Students in the School of Medicine have certain privileges and responsibilities different from those of other students. A student's behaviour must justify the trust the public places in the medical profession at all times. Students must also be aware that their own poor health may put patients and / or colleagues at risk. For this reason the school requires students to disclose any past or pending criminal proceedings and to bring any significant and relevant personal health issues to the attention of Student Services, the Disability Officer or the Pro Dean who may refer the students to occupational health if indicated.

Legislation differs by country and police force area. To avoid ambiguity students should report any formal warnings, cautions, fixed penalty awards, fiscal fines or convictions by any court or police forces in any country. The school is well placed to provide advice about the relevance and impact of low level involvement with the police, this is preferable to students attempting to conceal events that may surface later in their careers. Failure to disclose information is viewed seriously. Any information provided will be treated in the strictest confidence.

For returning students this is intended as an update, so only mention issues which have either occurred, or come to light since you last signed this declaration or that, for whatever reason, was failed to be declared at a previous declaration.

**1. Have you ever been found guilty of any criminal offence OR been cautioned OR issued with a fixed penalty fine OR given a formal warning OR given a fiscal fine in any country?**

No\*            Yes\* - make an appointment to see the Director of Teaching

**2. Are there any court proceedings against you pending or currently in progress?**

No\*            Yes\* - make an appointment to see the Director of Teaching

**3. Have you any reason to suspect that you may have been inadvertently exposed to blood borne viruses or TB over the summer period? (This may include exposure within or out with the clinical environment)**

No\*            Yes\* - make an appointment to see the Director of Teaching

**4. I confirm that if I have any significant and relevant health issues that have a bearing on Fitness to Practise or the conduct of my medical studies then I will engage Student Services, the Disability Officer and / or Pro Dean**

Yes\*            No\*

*\*Delete as applicable*

*Appointments to see the Director of Teaching may be made by email to [medicaldot@st-andrews.ac.uk](mailto:medicaldot@st-andrews.ac.uk)*

I declare that the above information is true and accurate:

Signed .....

Date .....

Print Name .....(also write name in top right of page)

**MSc Health Psychology**