**RETURN TO PRACTICE PLACEMENT INFORMATION**

# COHORT: Please indicate – September, May, January

**To be completed, signed, and dated by employer/placement provider (starting with the interview)**. Please complete and return this form to the successful applicant when all criteria have been met.

**Please note the student will need to upload this form to their CPD portal no later than 2 weeks before the programme starts.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Checklist** | **Yes** | **No** | **Comments** |
| Interview successful |  |  | **Please state reason why not if student has applied to UWE:** |
| Honorary Contract in place |  |  |  |
| Employed on Band 3 or 4 contract |  |  |  |
| 450 placement hours  (this is now required for all RTP candidates) |  |  | **Time span to complete practice hours (full /part time):**    **Over a timespan of (4 or 8 months).** |
| DBS in place |  |  |  |
| Students NMC number |  |  | **Please indicate which part of the register the applicant was on before their registration lapsed**   * Adult * Mental Health * Learning Disabilities * Child * Midwifery * Health Visitor (SCPHN) |

# Employer/Placement information (block letters please)

|  |  |
| --- | --- |
| **Organisation/Trust:** |  |
| **Educational lead managing the RTP Process** |  |
| **Contact Details: (email and telephone)** |  |

**Applicant information (block letters please)**

|  |  |
| --- | --- |
| **Applicant Name** |  |
| **Contact Details: (email and telephone)** |  |
| **Interview Date** |  |
| **Year NMC registration lapsed** |  |

## Please confirm the following has been completed by ticking Yes or No

|  |  |  |  |
| --- | --- | --- | --- |
| The NMC entry shows lapsed registration |  |  | Please note, applicants who cannot confirm that their application has not lapsed cannot be funded/admitted onto the RTP programme. |
| Uniform |  |  | **Please highlight/circle the relevant statement** a) applicant will wear the trust's uniform   1. applicant does not require to wear a uniform while on placement 2. the applicant needs UWE student uniform provided |

**Interviewer’s Signature**

**…………………………………………………………………………………………………………………………………………..**

Please complete and return this form to the successful applicant, who will need to upload to their CPD portal when they apply for the course with UWEBristol.

*(Please note the UWE application will only be approved once this completed document has been uploaded on the candidates CPD Dashboard)*