

## Non UK based Students

### Clinical and/or Educational Placement application form

Please complete this form electronically or in black ink.

Please then return either via email to: [academicdepartment@standrew.co.uk](mailto:academicdepartment@standrew.co.uk)

Or by post to

St Andrew's Healthcare  
Academic Department  
Billing Road  
Northampton  
NN1 5DG

Please note

You will be asked to pay a £100 administration fee which is NON REFUNDABLE once your application form is received

Incomplete application forms will not be considered

Personal Details – PLEASE GIVE YOUR FULL NAME AS IT APPEARS ON YOUR PASSPORT:	
Title:	
Family Name:	
First Name(s):	
Date of Birth:	
Place of Birth:	
Current address:	
Main Contact Email Address:	
Nationality:	
Domicile:	
Male/Female:	
Next of Kin (please state relationship to you):	
Emergency contact telephone number:	

<b>Academic Details</b>					
<b>Current Post/Role, please include name of course:</b>					
<b>Undergraduate or Postgraduate student:</b>					
<b>Full address of home organisation:</b>					
<b>Expected end date of studies:</b>					
<b>Summary of higher education to date:</b>					
<b>Proposed course of study</b>					
<b>Area of placement – please tick relevant box</b>					
<b>Psychiatry</b>	<b>Dietetics</b>	<b>Nursing</b>	<b>Physiotherapy</b>	<b>Psychology</b>	<b>Occupational Therapy</b>
<b>Proposed dates of placement, please give start and end date:</b>					
<b>References</b>					
<b>Please give the names, addresses, and telephone numbers of two people who could make reference to your general character and intellectual capacity. Ideally both referees should know you in an academic capacity</b>					
<b>Referee 1</b>			<b>Referee 2</b>		
<b>Name:</b>			<b>Name:</b>		
<b>Address:</b>			<b>Address:</b>		
<b>Telephone:</b>			<b>Telephone:</b>		
<b>Email:</b>			<b>Email:</b>		

Relationship to you:		Relationship to you:	
<b>REFERENCES FROM THE ABOVE PERSONS MUST BE SUPPLIED WITH THIS APPLICATION FORM</b>			
<b>Language Competence</b>			
Mother Tongue:			
Language of instruction at home organisation:			
I have sufficient knowledge of the English language to attend clinics and understand tuition:	Yes	No	
I have taken an English language test:	Yes If yes please give title of test, result and date taken below:	No	
I intend to take an English language test	Yes If yes please give title of test, and date test will be taken below:	No	
Please enclose a copy of any certificates relating to English language tests or qualifications with this application form.			

<b>Criminal Convictions</b>	
<p><b>You must circle 'Yes' in the box to the right if you have a relevant criminal conviction (this includes offences against the person and convictions for offences involving unlawfully supplying controlled drugs or substances).</b></p> <p><b>If you do not please leave blank</b></p>	<p><b>Yes</b></p>
<b>Declaration</b>	
<p><b>I confirm that all information given by me on this form is correct. Should any information prove to be incorrect St Andrews Healthcare reserves the right to withdraw any offer made.</b></p> <p><b>I give my consent to the processing of my data by St Andrews Healthcare</b></p>	<p><b>Signed:</b></p>
	<p><b>Print Name:</b></p>
	<p><b>Date:</b></p>
<b>The section below is to be completed by your current supervisor at your home organisation</b>	
<p><b>Please give a brief assessment of the applicant's character and conduct:</b></p>	

<p><b>Please give a brief assessment of the applicant's academic ability:</b></p>		
<p><b>Please confirm that the applicant has a good knowledge of the English language, both written and spoken:</b></p>	<p><b>Yes</b></p>	<p><b>No</b></p>
<p><b>Signature:</b></p>		
<p><b>Name inc title:</b></p>		
<p><b>Date:</b></p>		
<p><b>Please provide an official stamp from your organisation</b></p>		

**Personal Statement**

**In no more than 500 words state why you wish to undertake a placement at St Andrews Healthcare and your learning objectives for the placement**

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**VISA arrangements**

**Please provide details below of the relevant VISA arrangements you have in place in order to undertake this placement  
Please also attached proof to this application form**

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