

**MB BS Student Special Circumstances Application**  
**Clinical Placements (Primary and Secondary Care)**

**\*\*Students must apply each year – previous requests will not be carried forward\*\***

**Who should complete the form?**

This form is to be completed by you if you have Special Circumstances which need to be taken into account when arranging clinical placements for the following academic year. It should be submitted:

By email to

[hub.placements.med@uea.ac.uk](mailto:hub.placements.med@uea.ac.uk)

By post or in person to the

**MED Placements Team, LTS ZICER Hub**  
**University of East Anglia, Norwich NR4 7TJ**

**DEADLINE**

**YOUR APPLICATION MUST BE RECEIVED BY: 12pm, Friday 06 September 2019 (and should include the relevant evidence as explained below)**

**MB BS & GMC Requirement for a varied clinical placement experience**

During the MB BS degree programme you will be expected to undertake Primary Care Placements at different General Practices across Norfolk, Suffolk and Cambridgeshire, and Secondary Care Placements at NHS trusts based in Norwich, Great Yarmouth, King's Lynn, Suffolk, Essex and Northamptonshire.

GMC guidance states that students must receive clinical experience in a range of settings. In order to comply with this guidance we expect all students to have one full Secondary Care placement during their five-year course to occur outside Norfolk and Norwich University Hospital (NNUH), irrespective of Special Circumstances. Those of you who have Special Circumstances that you consider would lead to special placement requests to be submitted by you throughout your five years at UEA should be aware of this guidance and plan accordingly.

**Criteria for consideration**

The following are acceptable reasons for such an application:

- Disability or long term health condition
- Childcare
- Being a Primary Carer or having other dependants
- Other exceptional reasons will be considered on a case-by-case basis

Please note that the following will not be considered as reasons for specific placements (this is not an exhaustive list):

- Pets
- Sport club membership / commitments
- Jobs
- Senior Resident Tutor
- Extra-Curricular commitments (evening), including SAM sessions

### **Application submission does not mean acceptance**

Your application will always be considered, but you need to be aware that sometimes it may not be possible to accommodate your request and, therefore, your arrangements must be adaptable in these circumstances.

### **Failure to hand in an application**

If you do not submit a formal application on the designated *Special Circumstances Application* form and subsequently, upon allocation of groups, make LTS aware of circumstances which should have been previously submitted for consideration, we cannot guarantee that your request will be accommodated.

### **Supporting Evidence**

All applications **must** be accompanied by supporting evidence, submitted by the deadline above. Failure to submit evidence will mean that the request cannot be considered. The following information is required:

- **Disability or long term health condition** – current medical evidence; e.g. a medical certificate or statement from a health care professional who is treating you which confirms the reasons you are required to be in a specific area.  
**Returning students and students progressing from the Foundation Year Course only** - evidence is not required for chronic conditions that the MED Disability Liaison Officer (DLO), Maggie Bunting ([M.Bunting1@uea.ac.uk](mailto:M.Bunting1@uea.ac.uk)) is already aware of. If you are not sure if Maggie is aware, please make contact with Maggie.
- **Childcare** – a copy of your child(ren's) birth certificates, details of your childcare arrangements including pick up times, other people responsible for your child(ren), help you receive with childcare from others and reasons why these require you to be placed in a specific area
- **Primary Carer or other dependants** - if the person you are caring for is not your partner, sibling or parent, you should explain clearly why you are taking on the role of primary carer for this person. Please explain why these require you to be placed in a specific area. We will also require a statement from the person you are Carer for (if possible) or from a GP.
- **Other** – supporting evidence of the exceptional circumstances will be required and an explanation as to why these circumstances requires you to be placed in a specific area

**Student Special Circumstances Application Form  
2019-20 academic year**

**Student Registration No:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Year of study 2019-20:** \_\_\_\_\_

Office use only:

Evidence Attached YES / NO

Completed non-NUH SC placement YES/NO

Agreed YES / NO

PC -

SC - NNUH JPUH QEH IPS/COLC/OTHER  
Whole year / certain module:

Other info:

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**Please indicate the basis of your application:**

Disability/long term health condition

Childcare

Primary Carer

Other

**Please indicate the type of adjustment requested:**

E.g. all placements / Secondary Care only / distance of travel / whether this is for a specific rotation or module or all rotations etc.

**Have you previously completed a special circumstances request (delete as appropriate):  
(Returning students only)**

Yes – approved

Yes – not approved

No

**If yes, please provide brief details below (reason for request and outcome):**

**Please complete the relevant section below**

(If completing electronically boxes will expand, if completing in hard copy please use extra sheets as appropriate)

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**Disability or long term health condition: I have a specific health issue which could affect my placement**

Please provide details with medical evidence attached:

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**Childcare: I have dependant(s) under 14 living with me during the week**

<b>How many children are under 14?</b>		<b>How old are your children?</b>	
<b>What time and days do you drop your children off?</b>		<b>What time do you collect your children?</b>	
<b>Who else helps you with your childcare drop off and when?</b>		<b>Who else helps you with your childcare pick up and when?</b>	

**Please add any other information that you feel might helpful in considering your application on Childcare grounds.**

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**Primary Carer or other dependent: I am a Primary Carer or care for other dependants.**

Please provide details, including other support available:

**Other: there are other exceptional circumstances which affect my placement location**

Please provide details:

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**Declaration**

<b>Please read carefully and ensure you have read and abided by each of the points below.</b>	<b>TICK TO CONFIRM</b>
I hereby declare that the above information is correct and may affect my clinical placements (Primary and/or Secondary Care).	
I have provided and attached the required evidence to accompany my placement request.	
I confirm I have read the MB BS & GMC requirement for a varied clinical placement experience on page 1-2 of this form	
I confirm that I understand submission of this application does not mean it will automatically be accepted and my arrangements will be adaptable if this circumstance arises	

**Student signature** \_\_\_\_\_

**Date** \_\_\_\_\_