

Code of Conduct Agreement for Students undertaking Clinical Placements

Instructions for Students:

Complete this form and provide it to NSW Health when requested.

SECTION A: PERSONAL DETAILS

(Name details provided must be same as the details on the Student ID)

Family Name: _____ Given Names: _____

Address: _____

Student ID: _____ Phone Number: _____

Date of Birth: _____ Gender: _____

University/TAFE: _____

SECTION B:

I undertake that if I am charged or convicted of any criminal offence after the date of issue of my National Police Certificate or while I am completing my course, I will notify NSW Health before continuing with any clinical placement.

I have read and understood the NSW Health Code of Conduct, accessible at https://www1.health.nsw.gov.au/pds/Pages/doc.aspx?dn=PD2015_049, and agree to abide by the provisions set out in it at all times during all of my clinical placements within NSW Health Facilities. Failure to do so may lead to withdrawal of my clinical placements within NSW Health.

Name: _____ (please print)

Signature: _____

Date: _____