# Appendix 1: Breach of Student Fitness to Practise Concern Form

This form should be used by any member of staff or student who has reason to believe that a student may be in breach the UCO’s Student Fitness to Practise Policy. If there are two or more individuals raising the same concern, each person should complete a separate form from in their own words.

**Text

Description automatically generated**

**Beach of Student Fitness to Practise Concern Form**

**Information about the member of staff or student submitting the form:**

|  |  |
| --- | --- |
| **Name in Full:** |  |
| **UCO Email Address:** |  |

**Nature of the Fitness to Practise Concern:**

Please set out as clearly as possible the nature of the concern. In particular, it is important to know the names of any other persons involved (staff, students, or others), when the event(s) or incident(s) occurred and the exact circumstances. Please use a continuation sheet if you need to.

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**Important Note:**

You should be aware that some breaches of this Student Fitness to Practise Policy may give rise to disciplinary action against the student. Action will also be taken where cases are found to be vexatious.

**Declaration:**

I have read the UCO’s Student Fitness to Practise Policy.

I declare that the information contained on this form is accurate to the best of my recollection.

Signature:………………………………………………………………………..Date:....................

**Please address this form to the relevant Course Leader**