

**Wellbeing Services Prospective Student Form**

This form is for completion by our prospective students so that we can learn more about you.

Please complete the form below to let us know about any specific requirements you have while you are at the University. Please ensure that you have your supporting evidence ready to upload before completing this form. If you are unsure whether your evidence is appropriate, please upload it and we can advise you if we need anything further.

Please be aware that if you submit your form after the 31st of July 2024, we may not be able to put your support in place before the start of your course. We encourage you to complete the form as soon as possible, especially if you require adjustments such as practical assistance during your studies, specific equipment to be in place when you start, or if you need adaptations to your accommodation, such as a hoist.

**Informing us of your consent**

Please note we are a student-led service. Depending on your individual support requirements your information may be shared with the following people as appropriate:

* Your College
* Exams Team
* Accommodation and Estate Team
* Health and Safety Office

Ensure you read the following with regards to how your information may be shared with other staff within the University - [**Declaring a Disability or Health Condition**](https://www.exeter.ac.uk/media/universityofexeter/wellbeing/documents/Declaring_a_Disability_or_Health_Condition.pdf)**.** Please see our [**Privacy Notice**](https://www.exeter.ac.uk/students/wellbeing/policies/service/#a0) if you have any queries with regards to your personal data.

**Information for parents and carers**

Please see more information for parents and carers on our [**dedicated webpages**](https://www.exeter.ac.uk/students/wellbeing/).

**Funding information**

For information, advice and guidance on funding your support while at University, including details on the Disabled Students’ Allowances (DSA), please see our [**webpage explaining how to claim DSA**](https://www.exeter.ac.uk/students/wellbeing/support/fundingyoursupportdisabledstudentsallowance/) and more.

**Future correspondence**

Any correspondence we send you will be sent to the email address you used in your UCAS application (or your direct application if you didn’t go through UCAS). Please ensure this is your personal up-to-date email address, as otherwise you may not receive important updates from our advisors. Please click [**here**](http://www.ucas.com/ucas/undergraduate/apply-and-track/track-your-application/making-changes-your-ucas-undergraduate-application) for instructions on how to update your email address with UCAS.

Please note: questions marked (\*) are required.

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| **Personal details and course information** |
| First Name:\* |  |
| Surname:\* |  |
| Pronouns: |  |
| Exeter Reference Number, e.g. 710045678: |  |
| Date of birth e.g. 20/09/1988:\* |  |
| Email address:\* |  |
| Mobile number: \* |  |
| Course name: \* |  |
| Which campus will you study on? \* | StreathamSt Luke'sPenryn (Cornwall) N/A - distance learner  |
| Start date: \* |  |

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| **Your condition and how it impacts you** |
| 1) Please complete the following declaration with relevant disability/health condition. You can select more than one. \* | No known impairment, health condition or learning differenceSocial/communication conditions such as a speech and language impairment or an autistic spectrum conditionBlind or have a visual impairment uncorrected by glassesDeaf or have a hearing impairmentLong-term illness or health condition such as cancer, HIV, diabetes, chronic heart disease, or epilepsyMental health condition, challenge or disorder, such as depression, schizophrenia or anxietyLearning difference such as dyslexia, dyspraxia, or AD(H)DPhysical impairment (a condition that substantially limits one or more basic physical activities such as walking, climbing stairs, lifting or carrying)An impairment, health condition or learning difference not listed aboveDevelopmental condition that you have had since childhood which affects motor, cognitive, social and emotional skills, and speech and languagePrefer not to sayDisability – prefer not to say |
| 2) Please describe your medical condition/physical disability/mental health diagnosis or specific learning difference: \* |  |
| Please let us know the main areas affected by your medical condition/physical disability/mental health diagnosis or specific learning difference: \* | Fluctuations in moodFluctuating anxiety levelsConcentrationMotivationConfidenceEnergy levels / fatigueReading speed / accuracyNote takingOrganisationCo-ordinationHandwritingProcessing speedShort-term memoryCommunication/social difficultiesPhysical healthAttendanceHeightened stress in relation to deadlinesSleepEating & appetitePresentationsParticipation in class discussionsAnswering questions in classEstablishing a routine |

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| **Adjustments at University** |
| 3) Have you had any academic adjustments previously? Please note these will not automatically continue at the University. \* |  Yes/No  |
| 4) Does your health condition/disability have a significant impact on your accommodation requirements, e.g the location and accessibility, type of room, adaptions needed, catered or self-catered? Please give details. \* |  |
| 5) If you would like to give us any further details about your support requirements or previous support you have received, please do so here: \* |  |

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| **Additional information** |
| 6) Are you being supported by a mental health service or practitioner (eg. Doctor, psychiatrist, Community Mental Health Team or other relevant services)? \* |  Yes/No  |
| 7) So we can offer any advice on mental health support available in Exeter, it would be helpful if you can tell us more about what support you have been accessing. Please provide this in the next column. | *Please consider responding to this if you have answered ‘Yes’ to question 6.* |
| 8) Have you received support from a mental health service or practitioner over the past 2 years? \* |  Yes/No  |
| 9) Have you previously taken time out from or repeated your studies for health-related reasons? \* |  Yes/No  |

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| **Health and Safety**In the event of an evacuation are you able to (at all times, including during a medical episode such as a seizure): |
| 10) Independently leave the building in a reasonable time, including use of stairs? \* |  Yes/No  |
| 11) Hear the fire alarm, at all times (including during a medical episode such as a seizure, and when in bed and in the shower)? \* | Yes/No |
| 11) If you answered ‘no, to questions 10 and 11 above, please give further details: |    |

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| **Supporting evidence**  |
| Please ensure you share supporting evidence with this form as otherwise we will not be able to process it. (If you are unsure what you need to submit, have a look at our Medical Evidence Guidance webpage: [**https://www.exeter.ac.uk/students/wellbeing/support/medicalevidence/**](https://www.exeter.ac.uk/students/wellbeing/support/medicalevidence/))**\*** |

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| **Declaration** |
| 12) I confirm that the above information is correct to the best of my knowledge and that I have read the document ‘Declaring a Disability or Health Condition’. I will inform Wellbeing Services of any change in my circumstances. I consent to my information being shared as outlined above.\* |  Yes/No |
| 13) I also give consent for the University to confirm my course details with the relevant funding body to ensure disability funding support can be put in place. \* | I consent / I do not consent |