

Health Declaration

Applicant's Name

Programme Name

Certificate in Nursing (CAP) Programme

Please answer all questions in this questionnaire on your personal health status. While health problems are **not usually** a barrier to entrance onto the Bachelor of Nursing (BN) programme, it is important the Health and Fitness Curriculum Area be aware of these. We may wish to discuss some health issues with you more fully at an interview. Some health problems may make it difficult for you to study full-time, and/or meet clinical competency a Nursing Council of New Zealand (NCNZ) requirement. Each application is considered on an individual basis.

1 Do you have a current physical or mental health condition for which you require medical/health practitioner attention?

☐ No ☐ Yes - please provide details below.

2 In the last five years have you experienced physical or mental health issues for which you have required medical attention or medication?

☐ No ☐ Yes - please provide details below.

3 Do you have a history/current issues of addiction or dependence to alcohol or other substances? ☐ No ☐ Yes - please provide details below.

4 If you answered Yes to Q1 please give details as to how you manage this condition.

5 Do you have a skin condition (eg. Eczema, dermatitis, psoriasis, boils, latex sensitivity/allergy) that currently or often affects your hands, arms or face? ☐ No ☐ Yes - please provide details below.

6 List any prescription medication that you are currently taking (excluding oral contraceptives)

7 Please detail any other health factors (your own or those of family members) that the Department need to be aware of.

I have completed this Health Declaration truthfully to the best of my knowledge. I understand that a false declaration may result in my programme enrolment being terminated.

Signed

Date

Please return this form to enrolments@nmit.ac.nz or Te Pūkenga trading as NMIT, 322 Hardy Street, Nelson - Attention Enrolments Team

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This information and opinion provided in this report constitute 'personal information' in terms of the Privacy Act 2020. The person about whom this information and opinion are provided (the applicant) is entitled to have access to this report under Information privacy principle 6 (IPP6) and to seek correction of this report under IPP7. Information or opinion provided in this report may be disclosed under IPP11 to the applicant and members of the Selection Committee.