Please take the time to read this Agreement carefully.

This Agreement will be updated annually, and all University of Leicester medical students are required to comply with its contents. Students will be required to sign the current Medical Student Agreement as part of their annual registration at the commencement of each academic year of their course.

Regulations and guidance are frequently updated in line with best practice. It is important that each time you are asked to sign you re-read this Agreement and the associated regulations and guidance before you sign, even if you have signed a Medical Student Agreement previously.

By signing this Agreement and/or commencing or continuing your studies, you are confirming that you agree to abide by its contents and that you understand that failure to do so could lead the Medical School to reconsider your suitability for progression on the course. If there is anything contained within this Agreement which you do not understand or which you wish to discuss, you should raise this with the Director of Undergraduate Education before signing the document.

INTRODUCTION

Students registered for the MB ChB programme are studying for both a university degree and a professional qualification. The General Medical Council (GMC) states that “as a medical student, you have privileges and responsibilities different from those of other students”.

The Medical School is obliged to ensure that its students comply with the professional and ethical standards expected of medical practitioners. Medical students must be aware that their behaviour outside the clinical environment, including in their personal lives and on social media sites, can also impact their fitness to practise. This requires the Medical School to have policies and procedures which reflect current best practice as directed by the Department of Health, NHS England, NICE, and the General Medical Council.

It is a condition of you being accepted as a student of the University of Leicester Medical School, and a condition of you continuing in your studies, that you comply at all times with the regulations, policies and procedures issued (and updated from time to time) by the University and the University Medical School. Failure to do so may lead to disciplinary action against you and is likely to lead to an investigation by the University into your fitness to practise.

The regulations and guidance, together with the corresponding internal policies and procedures of Leicester University Medical School, embody key principles and standards of behaviour to ensure our students achieve the high standard of professional conduct expected of you as a medical practitioner. In summary these are:

- Patient safety and the care of the patient are paramount;
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• The relationship between a patient and a medical practitioner is based on trust. Your conduct must justify that trust, taking account of the fact that some patients will be in a highly vulnerable position;

• You must be polite and courteous towards patients and should treat them with dignity and empathy. This includes adopting appropriate etiquette with patients to create a rapport, foster trust and confidence and help patients feel at ease in what may be a stressful situation for them. For example, patients will usually expect you to shake their hand on meeting, make eye contact with them and address them directly in an empathetic tone of voice that is consistent with your status as a medical practitioner;

• You must not unfairly discriminate against patients by allowing your personal views to affect your professional relationships or treatment. You may practice in accordance with your personal beliefs provided that you do not treat patients unfairly, do not deny patients access to proper treatment and services, and you do not cause patients distress.

UNIVERSITY REGULATIONS

The University of Leicester Regulations (as they apply to all students of the University) can be found at http://www2.le.ac.uk/offices/sas2/regulations/general-regulations-for-taught-programmes.

The University of Leicester Medical School Regulations can be found at http://www2.le.ac.uk/departments/medicine/regulations.

All University of Leicester medical students must be familiar with, and at all times carry out their studies subject to, the above regulations.

GUIDANCE

The relevant guidance from the General Medical Council is as follows:

• Good Medical Practice.
  http://www.gmc-uk.org/guidance/good_medical_practice.asp
• Medical Students: professional behaviour and fitness to practise.
  http://www.gmc-uk.org/education/undergraduate/professional_behaviour.asp.
• GMC – Welcome to Medicine.
• GMC – Doctor’s use of social media
• GMC - Tomorrow’s Doctors
  http://www.gmc-uk.org/education/undergraduate/information_for_uk_students.asp.
• GMC – Promoting Excellence
  http://www.gmc-uk.org/education/standards.asp
KEY OBLIGATIONS DERIVED FROM THE ABOVE REGULATIONS AND GUIDANCE

I agree:

- that I am familiar with and will comply with the Leicester University regulations and GMC guidance above.

In particular, the Medical School would like to draw to your attention the following key codes of practice derived from the above documents. This list is not exhaustive and is not a substitute for familiarity with the above documents.

General

I agree to the following conditions and undertake to abide by them:

- I must reside in Leicester or within easy commuting distance. The only exception to this is when I am on clinical placements for which accommodation is provided.
- The Medical School considers a 20-mile radius from the centre of Leicester as the limit beyond which commuting is not possible (http://www.distance-calculator.co.uk).
- I must provide the Medical School with an emergency contact number and notify the School immediately of any changes to my address or to the information I submitted on application or enrolment.
- I must wear my identity badge in a prominent position at all times when on Medical School or Health Service premises.
- Although I have a Criminal Record Check before entering the course, I must immediately inform the University of Leicester Medical School if subsequently within or outside the UK:
  a) I am investigated for an alleged criminal offence;
  b) I am charged with a criminal offence;
  c) I have accepted a Police Caution;
  d) I am convicted;
  e) I accept the option of paying a penalty notice for disorder at the upper tier penalty level (in England and Wales), a penalty notice under the Justice Act (Northern Ireland) 2011 or a fixed penalty notice under the Antisocial Behaviour, etc. (Scotland) Act 2004; or
  f) I receive an anti-social behaviour order whether as the result of civil or criminal proceedings.
- Driving while under the influence of alcohol is considered a Fitness to Practise issue.
- Alcohol consumption to the extent that it affects clinical work or the work environment is considered a Fitness to Practise issue.
- Possessing, dealing in, or engaging in the misuse of, drugs, even in the absence of legal proceedings is considered a Fitness to Practise issue. See http://www2.le.ac.uk/departments/medicine/regulations/docs/2014-15/Code%20of%20Practice%20for%20Management%20of%20Substance%20Misuse%20.pdf
- Failure to attend an Occupational Health appointment and/or failure to comply with Occupational Health requirements is a professionalism concern and may result in referral to the Fitness to Practise Committee.
- I am expected to attend all components of the course throughout the MB ChB programme.
- I shall need to demonstrate professional courtesy and respect to all patients, relatives, carers, peers and staff (academic, medical, allied health professional, support), and I shall
not allow views about a person’s lifestyle, culture, beliefs, race, colour, gender, sexuality, age or social status to prejudice my interactions.

- In the event that I would like the Medical School to consider any disability I have, or suspect I have (including dyslexia), I shall proactively, and as soon as possible, access the appropriate University AccessAbility Centre.
- Bullying behaviours are unacceptable, and I shall familiarise myself with the list (albeit not exhaustive) of such behaviours provided by the University of Leicester School of Medicine Student Anti-bullying Policy.
- I am expected to maintain a professional boundary between myself and my patients (or anyone close to my patients), and between myself and members of staff.
- I understand that if I am allowed to suspend my studies that on return to the course I will be required to sign a Reintegration Agreement
- I respect the right of patients to refuse to be part of any teaching experience provided for me.
- I shall not pass off the work of another as my own (i.e. engage in plagiarism) or allow my work to be acquired by another person for presentation as if it were that person’s work (i.e. engage in collusion).
- I shall not engage in cheating in an examination.
- I shall not retain or remove examination material from an examination room.
- I shall not obtain ‘sign-off’ for activities which I have not attended or completed, nor sign on behalf of another person on a register or attendance list with or without that person’s authority.
- I must not, without the necessary prior consent, personally record tutorials, seminars, lectures, disciplinary or pastoral support meetings. [Please note that some of these events may in any case be recorded by the Audio-Visual Department for your use.]
- I must not be dishonest or participate in fraud, including dishonesty outside my professional role. I understand that falsifying research, engaging in financial fraud, or relying on fraudulent CVs or other false documents will have a significant bearing on my ability to remain on the course.
- In the very exceptional event that I am allowed to suspend my studies for more than 2 years I understand that on my return to the course, I will need to repeat the last year that I successfully completed and passed the relevant progression assessments.
- I understand that in the case of students starting the course in September 2015 that I will be required to undergo screening for dyslexia during September/October 2015. This screening will be free of charge.
- I am required to join the Medical Defence Union (MDU) or the Medical Protection Society (MPS) both of whom are able to provide advice in instances of alleged negligence by me. [Please note that the MDU and the MPS provide free student membership]. In the case of students starting the course in September 2015, continuation on the course is dependent upon the provision of evidence of membership of a defence organisation by 2 November 2015.
- Medical students are advised that the University’s IP Policy states that “As a general principle, the University will own the IP in teaching materials created by members of the University and used, or intended for, the delivery of courses. Examples of such materials include course books, course manuals, case studies, lecture slides, multimedia works (including podcasts and webcasts), tutorial papers, model answers, examination materials and software”. This means, therefore, that medical students are liable to civil action if they share/sell Leicester Medical School/University of Leicester teaching materials with/to individuals/agencies who are not members of the University of Leicester.
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Dress Code

I agree and understand that the University of Leicester Medical School operates a dress code with which I must comply to maintain patient safety and assist with infection control. [Where my clinical placements require me to observe the dress code of a local NHS Trust that may differ from that below, I confirm I will do so.]

I agree that:

- I am expected to maintain appropriate standards of dress, appearance and personal hygiene at all times so as not to cause offence to patients, teachers and colleagues.
- My appearance should not be such as to undermine a patient’s confidence in my professional standing. As a minimum, in a non-clinical environment, clothing should cover the body from the shoulder to the knee.
- Clothing which covers the face is not permitted when I am in contact with patients, carers or visitors because this impairs clear and effective communication; particularly for patients with hearing difficulties who may also be reliant on lip-reading.
- Head coverings worn as religious observance must not interfere with patient interactions and must be changed daily to minimise risk of cross infection.
- I must adhere to the local NHS Trust Policy on infection control in clinical areas and areas used for clinical skills training. Where this includes a requirement to be ‘bare below the elbow,’ any long sleeves must not be loose or dangling. The sleeves must be able to be rolled up or pulled back and held securely in place during hand-washing and direct patient care activity.
- In clinical areas where a ‘bare below the elbow’ policy applies, jewellery and watches must not be worn other where a plain wedding band is permitted.
- Tattoos should not be offensive or threatening.

Patient safety

I agree to and understand the following conditions:

- I must be registered with a GP in Leicester to ensure access to independent and objective medical care.
- I am required to keep my immunisations up to date.
- I am required to inform the Medical School as soon as possible, through the various facilities available for me to do so (namely Pastoral Support Unit, Occupational Health) of any medical condition, including mental health problems, which may affect my ability to carry on with my studies and or to practise medicine safely.
- I will act quickly to protect patients from risk if I have good reason to believe that a student colleague or health professional’s fit to practise may be impaired, by discussing such concerns with the Student Liaison Officer or a senior member of staff in the Medical School, or in accordance with the policy or protocol of any health authority I may be working in. In circumstances where unprofessional behaviour does not compromise patient safety, I should duly consider informing the placement leader in the first instance of any concerns I may have.
In the light of the Francis Report, I shall act quickly to protect patients from risk if I am concerned that basic fundamentals of care are not being met. I shall report my concerns to a member of staff responsible for care in that clinical arena in accordance with the organisation’s protocol, and inform my placement leader.

I understand that in certain circumstances that my attendance on the Medical Course may be suspended by the Medical School. Please see compulsory suspension of studies.

Information Governance and Confidentiality

I agree to and understand the key points below, although I recognise they are not an exhaustive list of examples of unacceptable or unprofessional behaviour:

- All information about patients is confidential.
- My authority to look up clinical results extends only to the clinical results that have direct relevance to my current clinical attachment in my capacity as a clinical apprentice. It is unacceptable and unprofessional behaviour, for example, to look up my own clinical results or those of my family, friends, peers or staff. I understand that if such behaviour comes to the attention of the Medical School, it will result in referral to the Fitness to Practise Committee.
- Holding clinically identifiable information on non-encrypted mobile media or media out of the healthcare setting is unacceptable and unprofessional behaviour.
- I need to log-off a computer in the workplace when I am no longer at the workstation; to fail to do so will be regarded as unacceptable and unprofessional behaviour.
- I will not discuss patients with other students or professionals outside the clinical setting, except anonymously (taking care to ensure that an affected individual cannot be identified in any way from such discussion). I am aware of the risk that confidentiality can be compromised in the workplace, such as on the ward, on public transport (including the UHL Hospital Hopper), in hospital lifts, on hospital corridors and in eating establishments within the hospital, to name only a few.

Social Media

I agree to and understand the following conditions:

- I shall maintain a professional approach, including preserving patient confidentiality, when communicating publicly. This applies to both speaking and writing in the media, where I shall not identify myself as a medical student, identify my place of work, or identify my colleagues or patients.
- The standards expected of medical students do not change because I am communicating through social media, and in a personal capacity.
- I must be constantly aware that when using social media, communication intended for friends or family may become more widely available. This applies not only to email and commercial sites such as Facebook, Twitter and YouTube but also contributions to blogs, message forums and email lists.
- I must be constantly aware that content uploaded anonymously can, in many cases, be traced back to its point of origin.
- I will complete on-line Social Media Awareness training as directed by the Medical School.
Patients

I agree to and understand the following conditions:

- I will treat information about patients as confidential. This includes ensuring that no patient can be recognised or identified from my clinical write-ups.
- I must always make it clear to patients that I am a medical student, not a qualified doctor. I understand that the use of the term ‘student doctor’ can be misleading, and it is my responsibility to give an explanation of my status to a patient. **[Please note that Under Section 49 of the Medical Act (1983) it is an offence for anyone who is not a registered doctor to pretend to be a qualified doctor.]**
- If I have a clinical encounter with a patient, and have an obligation to record the encounter in the patient notes, these notes must be accurate and legible accounts of the history and examination, with a minimum of abbreviations. They should be dated and signed, with the words ‘medical student’ appearing clearly beside the signature. **[Please note that patients will have access to their medical notes under the Data Protection Act (1998).]**
- I must inform other staff if I have been particularly concerned about something said or detected. Examples of such a circumstance would include a statement of suicidal intent by a patient.
- I am required professionally and sensitively to undertake a physical examination of patients as fully and as intimately as is clinically necessary in order to establish an informed clinical diagnosis, irrespective of the patient’s gender, culture, beliefs, disability, or disease.
- I must establish specific consent from a patient before undertaking an intimate examination (e.g. vaginal, rectal, genitalia, female breast). As a matter of good practice I will need to:
  - obtain prior consent from the patient for such examinations whether or not the patient is fully conscious, sedated or anaesthetised at the time of the examination;
  - obtain prior permission from the patient as part of informed consent, where the patient has to be made aware that this examination is being performed for teaching purposes;
  - record in the patient’s medical notes that consent for an intimate examination has been obtained;
  - obtain prior permission from the patient and ensure that such intimate examination on any individual patient should only be done by one student with the necessary consent on any one occasion;
  - obtain prior consent from the patient where there is to be a vaginal examination, as well as ensuring that you are supervised by a doctor, nurse or midwife;
  - obtain prior consent from the patient for a rectal examination, as well as ensuring that you are supervised by a doctor; and
  - obtain prior written consent from every patient undergoing genitalia and female breast examination, as well as offering the patient an option of being chaperoned by a doctor or nurse.
- I must not sign statutory certificates (e.g. Death, Sickness Benefit), witness documents (e.g. Permission for operation), or prescribe, initiate pathology or other investigations, or request blood cross matching.
- I must act at all times in a professional and courteous manner, and aim to put the patient and his/her carer or family at their ease in order to engender a feeling of trust and confidence to enable me to carry out my duties as a medical student doctor.
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Myself

I agree and understand that I am expected:

• to pursue my studies with positive commitment throughout my medical course and beyond;
• to read and assimilate, and use where it is in my interest to do so, all information provided to me so that I know where to turn to for information, guidance and support;
• to check notice boards, classroom boards and my University e-mail account regularly to ensure that I am fully informed of any changes to the course, and any updates of guidance and regulations, including teaching, learning and assessment arrangements;
• to participate actively in all learning activities of the curriculum, including dissection and direct observations and examinations of patients (including those involving touch);
• to make appropriate efforts to establish a support network of peers to help me personally and academically;
• to monitor my own academic progress by seeking continuously (not just at summative assessments) to test my understanding and knowledge by any means available, including self-tests, work book materials and formative assessments;
• to identify deficiencies in my knowledge and understanding early, and seek help actively from curriculum resources, my peers and appropriate academic staff;
• to reflect on my study skills as a matter of routine, and seek advice to remedy any difficulties I identify through the conduct of my own work, or those which I have been able to identify in myself through liaising with peer groups;
• to recognise when my well-being is compromised by personal or other difficulties and to seek immediate and appropriate professional support, at the earliest possible stage;
• to co-operate with, and give full consideration and be receptive to, the advice offered by those from whom I have sought assistance and support, and also the advice offered by those members of staff who are in a position to help me through difficulties;
• to recognise that the Medical School will monitor my progress and conduct through a formal 'support and concerns' procedure;
• to be assiduous in fulfilling my responsibility to maintain regular contact with my personal tutor, and to inform the School immediately if there are any serious difficulties in gaining access to my tutor;
• to attend all timetabled sessions, except during authorised absence for medical or other reasons deemed by the Medical School to warrant absence;
• to work evenings, weekends and shift-patterns as appropriate during clinical placements;
• to self-certify any absence of up to 5 days caused through minor illness and, where possible, immediately, or as soon as practicable, inform the relevant persons of such absences, but noting that repeated self-certification will be investigated by the Medical School;
• to understand that significant absence, or absence at the time of assessment, requires formal medical certification;
• to submit by stated deadlines all course work and other assignments required for the course, except where there is explicit agreement with the Medical School for deferral due to certified illness or other reasons deemed by the Medical School to warrant deferral;
• to accept responsibility for reading all questions and instructions on my assessment papers; and
• to demonstrate the level of academic attainment required by the Examiners in each year of the course.
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My Peers

I agree and understand that I am expected:

- to prepare adequately for all classes, in particular small group and clinical sessions;
- to be punctual in my arrival at all timetabled teaching sessions, especially clinical and community-based sessions;
- to foster a sense of supportive community in the Medical School by looking after my fellow students and collectively helping the Medical School to look after us all;
- to act with integrity towards my peers, refraining from defamation, protecting reputations and honouring confi dentialities;
- to show respect and courtesy in communicating, by whatever means, with my peers;
- to engage thoroughly with my peers, making a full and active contribution in all small-group sessions;
- to respect and promote the contributions of my peers in all small-group sessions (including inter-professional sessions) such that I actively facilitate the learning of all participants, without discrimination;
- to support the learning of my peers during lectures by refraining from talking, understanding that talking during lectures is unacceptable and may lead to a requirement to leave the lecture immediately and without question, such removal to be recorded as absence (and to recognise that this holds true for other teaching environments in which silence is required);
- to switch off mobile phones, and refrain from texting during teaching sessions and in health service settings; and
- to raise matters of collective student importance with my year representatives for referral to the Staff/Student Committee.

Staff

I agree and understand that I am expected:

- to be proactive in maintaining regular contact with my personal tutor, informing her/him of my progress and raising promptly any issues which might affect my academic progress;
- to respond promptly and fully to communications from my personal tutor and other members of staff;
- to interact with all staff in the Medical School and health service settings in a respectful and professional manner, both verbally and in written or electronic communications;
- to accept that I will need to self-direct my learning activities, and that, over and above the learning activities stipulated within the curriculum, academic support outside normal timetabled sessions, while often available, is of necessity limited by staff resources and is only available upon specific request, each request being judged on its merit;
- to contribute to evaluation of the curriculum by providing timely, constructive and thoughtful feedback on teaching when requested;
- to accept the authority of the Board of Examiners of the School of Medicine, and accept that its decisions are not negotiable;
- to accept that qualitative feedback may, where appropriate, be provided on my performance in assessments to enhance my subsequent learning and exam technique, but that the Medical School has a policy of not releasing detailed mark breakdowns or reviewing individual scripts with students.
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The Medical School

I agree and understand that I am expected:

- to sit all my assessments in Leicester, including, if necessary, resit exams which fall in vacation time;
- to inform the Medical School promptly if illness or some other cause prevents me from attending, or meeting deadlines, or affects my academic progress;
- to inform teaching staff at hospitals or in the community as soon as possible if I am unable to attend timetabled sessions; and
- to notify the School immediately of any development which may have an effect on my ability to practise, or on the good name of the Medical School and/or the medical profession.

The Public

I agree and understand:

- that the medical profession’s overriding duty of care to the public may, on rare occasions, require a breach of patient confidentiality, but in such circumstances I shall need to seek advice from experienced medical professionals before making such a breach; and
- that in the interests of public safety, in accordance with Tomorrow’s Doctors, and in my own best interests, information pertinent to my educational achievements and to my fitness to practise, may be shared by the University of Leicester Medical School with training providers, employers, regulatory organisations and other medical schools, and by signing this agreement I am providing express consent for such personal data to be processed in this way.
- That in the interests of patient and public safety that if you are found to be unfit to practise by the Fitness to Practise Committee and your course is terminated that a copy of the decision against you will be stored on a central database (maintained by the Medical Schools Council, the Pharmacy Schools Council and the Dental Schools Council) which is accessible only to courses leading to entry to a registered profession in the UK. Only once any appeals process has been completed will the student’s details be added to the database. See [MSC Protocol for sharing information on students found unfit to practise on courses leading to entry to a registered profession](#).

OUR RESPONSIBILITIES TO YOU

I understand that the University of Leicester Medical School will:

- ensure that there will be a lead person or lead persons responsible to the Director of Undergraduate Medical Education for ensuring that the standards prescribed by the GMC in each domain of *Tomorrow’s Doctors* (2009) are met;
- provide advice on appropriate conduct and attitudes at the start of my course and as the course proceeds;
- provide as many teaching staff as resources reasonably allow having regard to operational needs;
- ensure that teachers are competent to teach and appraised of the learning objectives and standards that need to be attained;
- strive to deliver teaching as scheduled;
- provide a wide range of learning opportunities and recognise a diversity of learning styles;
• provide clinical experience in hospital and community settings;
• strive to ensure that there are equivalent opportunities for all medical students where teaching of the same subject takes place on many sites;
• provide me with appropriate curriculum information and a range of study materials designed to enable me to learn effectively, and monitor for myself the state of my understanding and knowledge;
• provide identified routes for me to obtain subject-specific guidance for self-study from appropriate academic staff;
• provide me with the opportunity for formative assessment;
• assess me fairly and regularly;
• provide, where appropriate, feedback on assessment performance (but not a detailed mark breakdown or a review of individual scripts);
• provide opportunities for me to give feedback on all major elements of the course;
• be responsive to feedback;
• recognise excellence and acknowledge it;
• foster an attitude of approachability and openness in relations between students and the Medical School;
• provide me with written guidance about the Medical School support services available to me and how I may access them;
• provide an identified staff member to monitor individual progress and offer advice;
• provide reasonable access to the Pastoral Support Unit who are experienced in dealing with the pastoral problems of medical students and able to refer on to more specialised support services if necessary;
• save where referred to in this agreement, maintain appropriate confidentiality; and
• provide information about, and ready access to, University-wide support services.
I understand that:

- on successful completion of the undergraduate course, I will receive my MB ChB degree, which is a primary medical qualification (PMQ), that holding a PMQ entitles me to provisional registration with the General Medical Council (GMC), and that provisionally registered doctors can only practise in approved Foundation Year 1 posts, since the law does not allow provisionally registered doctors to undertake any other type of work;
- I will receive a transcript from the Medical School and that the Medical School cannot provide a replacement.
- to obtain a Foundation Year 1 post, I will need to apply during the final year of my undergraduate course through the UK Foundation Programme Office selection scheme, which allocates these posts to graduates on a competitive basis, although I must realise that while, so far, all suitably qualified UK graduates have found a place on the Foundation Year 1 programme, this cannot be guaranteed, as, for instance, if there were to be an excessive number of competitive applications from non-UK graduates;
- I understand that I must follow Medical School guidance in respect of transfer of information [TOI] to the Foundation School;
- I understand that I must follow Medical School guidance in respect of declaring an appearance before the Fitness to Practise Committee or Health and Conduct Committee to the GMC when I apply for provisional registration;
- successful completion of the Foundation Year 1 programme is normally achieved within 12 months and marked by the award of a Certificate of Experience, and I will then be eligible to apply for full registration with the GMC; and
- I need full registration with a licence to practise for unsupervised medical practice in the NHS or private practise in the UK.
Acknowledgements

The content of this Agreement has benefited considerably from similar agreements produced by other medical schools in the UK. We give particular recognition to the following medical schools: Nottingham, University College London, Imperial College London, Norwich, and Bristol.

UNIVERSITY OF LEICESTER MEDICAL SCHOOL PRE-COURSE STUDENT AGREEMENT

Declaration

You will be asked at the point of registration/registration to confirm that you have read the above University of Leicester Medical School Pre-course Agreement and agree to adhere to it.

By confirming that you have agreed with the Agreement, you understand that failure to follow its provisions, and those regulations and guidances referred to within this Agreement, could ultimately result in the Medical School reviewing your progress (by referring you to the Board of Examiners and/or the Fitness to Practise Committee, both of which have the power to terminate a student’s course).

Having agreed to this Declaration, you understand that any failure on your part to have read this Agreement and the associated regulations and guidance cannot be used as mitigation.