

CONFIDENTIALITY AND INFORMED CONSENT

STUDENT DECLARATION FORM

I, ... confirm that I have attended a teaching session on **confidentiality and informed consent** on (date), in reference to the audio/video recording of skills sessions.

I understand the importance of maintaining confidentiality and gaining informed consent.

I understand that any **breach of confidentiality** and **failure to gain informed consent** from students acting as clients or helpees, will be **deemed to be unprofessional conduct** and may result in procedures under the School Specific Regulations Relating to Fitness to Practice being invoked.

I also understand that any written work or video recording that fails to maintain anonymity of individual, does not include an informed consent form, will be referred and will receive a mark of '0'.

Student Signature Date.....