

Vocal Health Education Fitness to Practice Declaration

**This is to be signed by all qualified
Voice Rehabilitation Specialists
applying for registration as a
Specialist Member of Vocal Health
Education**



Full Name:	
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<p>Please answer the following questions:</p> <p>1. Have you ever been convicted by the courts or cautioned, reprimanded or given a final warning by the police? Please give details of offences, penalties and dates in the table below.* (Note that the registration you have applied for is exempted under the Rehabilitation of Offenders Act (Exceptions Order) 1974, which means that <u>all</u> convictions, cautions, reprimands and final warnings on your criminal record need to be disclosed.</p> <p>Please ✓ as appropriate: Yes <input type="checkbox"/> (Please provide details) No <input type="checkbox"/> (Proceed to Q2)</p>

Date	Details

*If any circumstances change which would affect your response to this question, you must inform VHE of the details without unnecessary delay.

<p>2. Have you ever been disqualified from working with children or vulnerable adults or subject to any other sanctions imposed by a regulatory body?</p> <p>Please ✓ as appropriate: Yes <input type="checkbox"/> (Please provide details) No <input type="checkbox"/> (Proceed to Q3)</p>
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Date	Details

<p>3. Please sign the following declaration and return this form to VHE with your application for registration. Failure to complete this declaration will result in your application being withdrawn.</p> <p>I confirm that the information I have given on this form is correct and complete and I understand that any false information could result in my application being rejected or, if appointed, in my dismissal from the register.</p> <p>I attach a copy of my current enhanced DBS certificate, Professional Indemnity Insurance, most recent Safeguarding training, and evidence for ongoing supervision and CPD</p>
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Signature:	Date:
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