University Date Stamp

SCHOOL OF NURSING - PRACTICE LEARNING DOCUMENTATION SUBMISSION SHEET

This sheet must be completed in full and attached to the front of each item of practice learning documentation prior to submission.

Student Name (Please Print)	
Student ID	
Course Title	
Module Code/Title	
Link Lecturer	
Date Due	

1. Practice learning documentation must be submitted within the timeframe specified within the practice learning booklet/portfolio
2. All sections of practice learning documentation must be complete prior to submission
3. In exceptional circumstance, students may seek prior consent from the Course Director or Academic Coordinator (Practice Learning/Pre-registration Nursing) to submit practice learning documentation after the official deadline; such requests are made via an EC1 Form (and in the case of illness supported by a medical certificate).
4. Practice learning documentation submitted without consent after the deadline will not normally be accepted and the matter will be referred to the Course Director and/or Academic Coordinator (Practice Learning/Pre-registration Nursing)

STUDENT DECLARATION

1. I declare that this is all my own work and does not contain unreferenced material copied from any other source. If it is shown that material has been plagiarised, or I have otherwise attempted to obtain an unfair advantage for myself or others, I understand that I may face sanctions in accordance with penalties as determined by the University, which include referral to Fitness for Practice proceedings. The portfolio/booklet may not be considered to support progression for that element of the course and the reason recorded on my file.
2. I declare that all entries and signatures made in the practice learning documentation are authentic and have not been manipulated by myself or others. I understand that should the entries and/or signatures found to be not authentic, I will be referred to Fitness for Practice Committee. Should this occur, it will be recorded in my file and the Nursing and Midwifery Council may be made aware.

Student's Signature		Date	

PRACTICE LEARNING DOCUMENTATION RECEIPT – NOT VALID UNLESS STAMPED

Student Name

Student Name (Please Print)	
Student ID	
Module Code/Title	

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It is the responsibility of the student to retain this receipt in a safe place. Students may be required to produce this receipt as proof of submission.