

Readmission application for registration

(for applicants who have previously been registered with the HCPC)

PLEASE TURN OVER

27591/04-19



Please send your completed form to:
registration@hcpc-uk.org



Please call us on +44 (0)300 500 4472 if
you need any help in completing this form.

Section 1 Registrant details

Name

Profession

Your registration number

When did you last use your protected title?
D D M M Y Y Y Y

Section 2 Declarations

- I **declare** that I have read, understood and will comply with the HCPC's standards of conduct, performance and ethics.
- I **understand** that I must have in place a professional indemnity arrangement which provides appropriate cover and I confirm that I will have this in place when I practise.
- I **confirm** that I have read the subject information statement which accompanies this application form and understand that the HCPC may process my personal data as required by the Health Professions Order 2001 (the **Order**). I consent to the HCPC processing my personal data for the purposes set out in the subject information statement which are not required by the Order. I understand that I may, by notice in writing to the HCPC, withdraw my consent to the HCPC processing my personal data for any marketing purposes.
- I **agree** to pay my registration fees once I am notified by HCPC that I can be registered.
- I **consent** to the HCPC contacting any person to obtain further information about my application or to verify the information that I have provided and agree that any person who is so contacted may provide the HCPC with any information about me which that person holds.
- I **confirm** that the information I have provided in this application is correct and understand that fraudulently procuring an entry in the HCPC Register is a criminal offence under article 39 of the Order.

Date
D D M M Y Y Y Y

Signed
declaration

Please attach your electronic signature in the signature box. If you are not able to do this, please print off your form and sign the signature box before emailing your application to us. Please do not type your name into this field as we require a signature.

Section 3 Paying your fee

Please do not send a payment with your application.

You will receive an email, with a link to the HCPC portal requesting that you log in to make payment. If you have not yet registered for an HCPC portal account, there will be an additional link in the email which will allow you to do so. You will have the option to pay the remaining registration fee in full or make a part payment and set up a direct debit instruction for collection of future instalments.

If you would like to update the email address we hold on your record please complete the relevant section on the second page of this form.

Section 4 Character and health self declarations / Vetting and Barring Schemes

We must check the health and character of everyone that applies to join our Register. This is to make sure that applicants will be able to practise safely and effectively within their profession. We can also take action against a registrant if their health and/or character raises concerns about their ability to practise safely and effectively. Please read the accompanying guidance notes carefully before completing this section. If you answer to any of the questions below is **yes**, please indicate by placing a cross in the appropriate box and give details on a separate sheet.

Have you been convicted of a criminal offence or received a police caution (other than a protected caution or protected conviction)?

Have you been disciplined by a professional or regulatory body or your employer?

Have you had civil proceedings (other than a divorce / dissolution of marriage or civil partnership) brought against you?

Do you have any physical or mental health condition that would impair your fitness to practise the profession to which your application relates?

Are you or have you ever been barred under the Safeguarding Vulnerable Groups Act 2006 and / or the Protection of Vulnerable Groups (Scotland Act 2007) from working with: Children and / or Vulnerable adults

