****

**Placement Checklist - DClinPsych**

Please confirm the following:

[ ]  I have received written and verbal information and instruction about placement policy and procedure prior to starting placement

[ ]  I have understood it

[ ]  I will comply with it

[ ]  I will not bring the good name of either UCC or my placement organisation into disrepute

[ ]  I have been advised that UCC Student Rules apply while I am on placement

The contact name and number for my Primary Contact Person (in the event of a critical incident) is as follows

Name ……………………………………….

Phone number ………………………………

[ ]  I understand that if information changes in relation to their Primary Contact Person, it is my responsibility to update SoAP with the correct information

[ ]  I give permission to SoAP, UCC to contact my Primary Contact Person if deemed necessary

[ ]  I give permission to SoAP, UCC to circulate a copy of my CV to the Placement Organisation

This checklist must be completed and returned to the Christian Ryan, Placement Coordinator, before placements begins