

Education and Training Committee – 8 March 2012

Organisational name change – consequential amendments to HPC admission forms

Introduction

This paper provides an explanation of changes made to the following documents:

- Admission form – UK applicants
- Admission form – Readmission applicants
- Admission form – Returning to practice applicants
- Admission form – International / EEA applicants

Decision

The Education and Training Committee (ETC) is requested to approve changes to these admission forms.

Background information

The admission forms need to be amended in preparation for the Register opening for social workers on 1 August 2012 and the Health Professions Council being renamed the Health and Care Professions Council.

The changes also reflect feedback provided by applicants, registrants, HPC employees and other stakeholders about making the form clearer and more user friendly.

The main changes to the admission forms are:

- all mentions of the Health Professions Council or HPC being changed to the Health and Care Professions Council or HCPC.
- social workers added to all relevant sections of the application form
- all mentions of the Health Professions Order being changed to the Health and Social Work Professions Order 2001
- all mentions of ‘health professional’ being changed to ‘health and care professional’, or just ‘professional’, depending on context.
- new HCPC logo replacing the old HPC logo

The changes are currently being reviewed by the Solicitor to the Council. Please note these amendments are subject to minor editorial amends.

Resource implications

Nil

Financial implications

Nil

Background papers

Nil

Appendices

Admission form – UK applicants

Admission form – Readmission applicants

Admission form – Returning to practice applicants

Admission form – International / EEA applicants

Date of paper

22 February 2012



Please read the guidance notes before completing this form.

UK application for registration (for applicants who have completed a UK approved programme)

Registration Department
184 Kennington Park Road, London, SE11 4BU

+44 (0)845 300 4472
www.hcpc-uk.org
registration@hcpc-uk.org



Before completing your application form you will need to read the guidance notes for UK applicants and the standards of proficiency for your profession. Please complete this form in BLOCK CAPITALS using a black pen.

Your title Mr Mrs Miss Ms other (please specify)

Your first name

Your surname / family name

Your profession

Once you have completed this application form, please make a photocopy of it and all of the supporting documents for your own records. Please send your application by a secure postal method if you want to be certain of delivery.

Please make sure you have included the following documents with your application. Failure to do so will result in your application being returned to you.

Checklist – please check to ensure you have enclosed the following items with your application	Please cross
① A completed application form	<input type="checkbox"/>
② A 'Paying your fees' form with appropriate payment by cheque or money / postal order	<input type="checkbox"/>
③ A completed, signed and dated HCPC character reference form	<input type="checkbox"/>
④ Certified* copies of two appropriate documents to confirm your identity	<input type="checkbox"/>
⑤ Certified* evidence of any change of name (if applicable)	<input type="checkbox"/>
⑥ Relevant return to practice forms (if applicable)	<input type="checkbox"/>

* Please refer to guidance notes for more information regarding certification of documents.

Please also check that you have not :	<input type="checkbox"/>
① stapled any part of your application (applications are scanned and staples damage the scanner)	<input type="checkbox"/>
② placed your application in a folder, binder or plastic / paper wallet	<input type="checkbox"/>
③ included any original documents	<input type="checkbox"/>
④ included any document or item which you need to be returned (completed application forms remain the property of HCPC)	<input type="checkbox"/>

Your payment	
I enclose a cheque/money order for the amount of £ <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>	Attach a recent passport sized photograph of yourself here. Please do not staple.

For HCPC use only	
Date stamp	Date of registration <input type="text"/>
Amount received £ <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>	Registration number <input type="text"/>
Application number <input type="text"/>	Registered by:
Pass list checked: Yes / No Checked by:	

Section 1 Registration details

Have you ever previously applied for registration with the HCPC or the Health Professions Council (HPC)? Yes No

If yes, please give your application number

I am applying for registration as a / an (see guidance notes for details of protected titles)

- Arts therapist (If you have chosen arts therapist please cross the box(es) below relevant to you)
- Art psychotherapist Art therapist
- Drama therapist Music therapist
- Biomedical scientist
- Chiropodist / podiatrist
- Clinical scientist (If you have chosen clinical scientist please cross the box(es) below relevant to you)
- Audiology Cellular science
- Clinical biochemistry Embryology
- Clinical genetics Haematology
- Clinical immunology Histocompatibility and immunogenetics
- Clinical microbiology Medical physics and clinical engineering
- Clinical physiology
- Dietitian
- Hearing aid dispenser
- Occupational therapist
- Orthoptist
- Operating department practitioner
- Paramedic
- Physiotherapist
- Practitioner psychologist (If you have chosen practitioner psychologist please cross the box(es) below relevant to you)
- Clinical psychologist Counselling psychologist
- Educational psychologist Forensic psychologist
- Health psychologist Occupational psychologist
- Sport and exercise psychologist
- Prosthetist / orthotist (If you have chosen prosthetist and orthotist please cross the box(es) below relevant to you)
- Prosthetist Orthotist
- Radiographer (If you have chosen radiographer please cross the box(es) below relevant to you)
- Diagnostic radiographer Therapeutic radiographer
- Social worker
- Speech and language therapist

Section 3 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 character raises concerns about their ability to practise safely and effectively. Please read the accompanying guidance notes carefully before completing this section.

Have you been convicted of a criminal offence, received a police caution or been convicted of a criminal offence for which you received a conditional discharge?

Yes No If yes, please give details on a separate sheet.

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

Yes No If yes, please give details on a separate sheet.

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

Yes No If yes, please give details on a separate sheet.

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

Yes No If yes, please refer to the accompanying guidance notes for further advice and give details on a separate sheet.

Note: you will be required to make a declaration to confirm that you do not have any health condition that would impair your fitness to practise your profession at Section 7 of this form.

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? Yes No If yes, please give details on a separate sheet.

Vulnerable adults? Yes No If yes, please give details on a separate sheet.

Registration numbers

Independent Safeguarding Authority (England, Wales, Northern Ireland) registration number (if any):

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Protecting Vulnerable Groups Scheme (Scotland) registration number (if any):

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Section 4 Education and training

Title of your approved programme

Programme start date (DD/MM/YYYY)

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Programme end date (DD/MM/YYYY)

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Name of education provider

Street name

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Town / city

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County / state

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Postcode / zipcode

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Mode of study

Block release	<input type="checkbox"/>	Work based learning	<input type="checkbox"/>
Distance learning	<input type="checkbox"/>	Full time accelerated	<input type="checkbox"/>
Sandwich	<input type="checkbox"/>	Mixed mode	<input type="checkbox"/>
Flexible	<input type="checkbox"/>	Part time	<input type="checkbox"/>
Full time	<input type="checkbox"/>	Part time (in service)	<input type="checkbox"/>

Section 5 Practice outside the United Kingdom (UK) form

If you successfully completed a UK approved programme more than five years ago, but have practised your profession outside the UK during the last two years, you do not need to undertake a period of updating. If this applied to you, please complete this form and include it with your application.

If you have worked for several different employers, please photocopy or print off as many copies of this form as you need.

Applicant details

Your title Mr Mrs Miss Ms other (please specify)

Your first name

Your surname / family name

Previous name(s)

Job title / position in English

Job title / position in its original language
(if applicable)

Work details (work place / placement to which this form is relating)

Organisation

Department

Address

Town / city

County / state

Postcode / zipcode

Country

Name of manager

Contact telephone number

Contact email address

Dates you practised outside the UK (DD/MM/YYYY)

From / / to / /

Instruction to your bank or building society to pay by direct debit

Name and full postal address of your bank or building society

Originator's identification number

9 5 2 2 8 8

To the manager Bank / building society

Reference Number

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Address

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Instructions to your bank / building society

Please pay HCPC direct debits from the account detailed in this instruction subject to the safeguards assured by the direct debit guarantee.

The amounts are variable and will be debited every six months.

I understand that this instruction may remain with HCPC and, if so, details will be passed electronically to my bank / building society.

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Postcode

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Name(s) of account holder(s)

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Date

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D D

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M M

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Y Y Y Y

Bank / building society

Account number

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Branch sort code

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Signed
declaration

Banks and building societies may not accept direct debit instructions for some types of account

THIS GUARANTEE SHOULD BE DETACHED AND RETAINED BY THE PAYER

The direct debit guarantee

This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits. If there are any changes to the amount, date or frequency of your Direct Debit HCPC will notify you 10 working days in advance of your account being debited or as otherwise agreed. If you request HCPC to collect a payment, confirmation of the amount and date will be given to you at the time of the request. If an error is made in the payment of your Direct Debit by HCPC or your bank or building society you are entitled to a full and immediate refund of the amount paid from your bank or building society - If you receive a refund you are not entitled to, you must pay it back when HCPC asks you to. You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us.

Section 7 Declaration of information

- **I declare** that my physical and mental health do not impair my fitness to practise the profession to which my application relates.
- **I declare** that I have read, understood and will comply with the HCPC's standards of conduct, performance and ethics.
- **I have** read the data protection information statement set out in the notes which accompany this application form and understand that the HCPC may process all of my personal data, as defined by the Data Protection Act 1998, for the purposes set out in statement. I understand that my consent is not required for the HCPC to undertake the processing required by the Health and Social Work Professions Order 2001.
- **I consent** to the HCPC processing my personal data for the purposes set out in the information statement which are not required by the Health and Social Work Professions Order 2001. I understand that I may withdraw my consent to the HCPC processing my personal data for any marketing purposes by writing to the HCPC informing it that I am withdrawing that consent.
- **I understand** that fraudulently procuring an entry in the HCPC Register is a criminal offence under article 39 of the Health and Social Work Professions Order 2001.
- **I declare** that I have read, understood and will comply with the HCPC's requirements for continuing professional development (CPD).
- **I agree** to pay the fees for my registration using the option chosen by me in Section 6.
- **I consent** to the HCPC contacting any person to gather further information on my application or to confirm the information that I have provided. I consent to any person approached by the HCPC to assist with the evaluation of my application providing the HCPC with any information held by that person in respect of me that the HCPC may request.

Date (DD/MM/YYYY)

Signature

Section 8 Character reference

Please give this section to the person you ask to complete your character reference form.

Referee's guidance on completing the character reference

Before being registered under the Health and Social Work Professions Order 2001 an applicant must satisfy the HCPC that they are of good character.

You have been asked to complete a character reference by the person who has given you this form (the applicant), because they want to be registered with the Health and Care Professions Council (HCPC).

A character reference needs to be provided by a person of standing in the community who is not a relative of the applicant and has known the applicant for at least three years. A professional person (eg a registered professional, a solicitor, barrister or other legal practitioner or an accountant) will be recognised as a person of standing in the community as will a:

- bank manager or officer;
- judge, magistrate or other judicial official;
- minister of the Church, Rabbi, Imam or other recognised religious official;
- member of a parliament or other legislative body;
- serving officer in HM Armed Forces; or
- a teacher / lecturer.

This is not an exhaustive list and if you have any questions as to whether you are able to provide a character reference please contact us on +44 (0)845 300 4472.

Once completed please return the character reference directly to the applicant.

Character reference continued

This form is to be completed by your character referee

Before being registered under the Health and Social Work Professions Order 2001 an applicant must satisfy the HCPC that they are of good character. A character reference must be provided on this form by a person of standing in the community who is not a relative of the applicant and who has known the applicant for at least three years. For a list of acceptable referees, please refer to the guidance notes for UK applicants.

Please return this form to the applicant once complete.

Applicant details

Name	<input type="text"/>
Address	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
Profession	<input type="text"/>

Referee details

Name	<input type="text"/>
Occupation	<input type="text"/>

If you are a member of a professional or regulatory body, please provide its name and your membership / registration number

<input type="text"/>
<input type="text"/>

Practice or business address	<input type="text"/>
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<input type="text"/>

Telephone	<input type="text"/>
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Email address	<input type="text"/>
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Please state capacity in which you know the applicant (do not leave blank)	<input type="text"/>
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<input type="text"/>

I confirm that I have known the applicant for **at least three years** and know of no reason why they should not practise the above profession with honesty and integrity.

The HCPC may make further enquiries in respect of the applicant and you, as referee, to verify or clarify information about the applicant and your reference. Should any of the information you have supplied in this reference not be accurate or if you have made any false claims, you may be committing a crime.

The HCPC processes your personal data as disclosed in this reference for the purpose of administering the application to which it is attached. The HCPC may contact you to ensure that your reference is accurate and may also disclose your personal data to third parties to check its accuracy, including but not limited to checking that you are a member of a professional body. Should any inaccuracies be established, your personal data may be transferred to a third party for further investigation. Should a registrant transfer to another country, your reference may be passed to any appropriate regulators in that country.

By signing this reference you confirm that the information that you have provided is accurate and that your personal data may be processed for the purposes specified above.

Date (DD/MM/YYYY)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Signature
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✉ Registration Department
184 Kennington Park Road, London, SE11 4BU

+44 (0)845 300 4472
www.hcpc-uk.org
registration@hcpc-uk.org

hcpc health & care
professions
council

These guidance notes are intended to help you complete the application form. They will also help you understand the application process. However, if after reading the guidance notes there is something you do not understand please contact us.

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- Meeting our standards
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About the HCPC

We are the Health and Care Professions Council. We are a regulator of health and care professionals and our job is to protect the health and wellbeing of people who use the services of the health and care professionals registered with us.

To protect the public, we set standards that health and care professionals must meet. Our standards cover health and care professionals' education and training, behaviour, professional skills and their health. We publish a Register of health and care professionals who meet our standards.

We currently regulate 16 professions:

- Arts therapists
- Biomedical scientists
- Chiropodists / podiatrists
- Clinical scientists
- Dietitians
- Hearing aid dispensers
- Occupational therapists
- Operating department practitioners
- Orthoptists
- Paramedics
- Physiotherapists
- Practitioner psychologists
- Prosthetists / orthotists
- Radiographers
- Social workers (in England)
- Speech and language therapists

How we are run

We were created by legislation called the Health and Social Work Professions Order 2001. This lays out our responsibilities and it gives us our legal authority to carry these out. We have a Council which is made up of registered health and care professionals and members of the public. This Council sets our strategy and policy and makes sure we are fulfilling our duties under the Health and Social Work Professions Order.

About registration

Health and care professionals must register with us in order to use the protected title for their profession. This means that even if you have completed a course in, for example, physiotherapy, you are still not able to call yourself a physiotherapist unless you are registered with us.

Registration shows you meet our standards for your profession. Registration shows the public that health and care professionals are fit to practise and they are entitled to use the protected title(s) for their profession. It shows the people on our Register are part of a profession with nationally recognised standards set by law.

When we say someone is 'fit to practise', we mean they have the skills, knowledge, character and health to practise their profession safely and effectively.

Applying for registration

Completing an approved course does not guarantee someone will become registered. It shows us the applicant meets our professional standards and is eligible to apply for registration. We need additional information from them in order to be able to register them.

The information provided by applicants helps us to know that:

- they are who they say they are;
- they meet our standards; **and**
- we can contact them if we need to.

Meeting our standards

Everyone on our Register must meet the standards of proficiency we have set. The standards of proficiency are the professional standards which health and care professionals must meet in order to be registered. If you need a copy in an alternative format, please contact us. Our contact details can be found at the front of this form. The standards of proficiency are made up of generic standards, which all registered health and care professionals must be able to meet, and profession-specific standards, which only apply to one profession.

Protected titles

Each of the professions we regulate has at least one protected title. Anyone who uses one of these titles must be on our Register. Anyone who uses a protected title who is not registered with us is breaking the law and could be prosecuted.

Part of Register	Title
Arts therapists: Art, Drama or Music	Art psychotherapist Art therapist Drama therapist Music therapist
Biomedical scientists	Biomedical scientist
Chiropodists / podiatrists	Chiropodist Podiatrist
Clinical scientists	Clinical scientist
Dietitians	Dietitian Dietician
Hearing aid dispensers	Hearing aid dispenser
Occupational therapists	Occupational therapist
Operating department practitioners	Operating department practitioner
Orthoptists	Orthoptist
Paramedics	Paramedic
Physiotherapists	Physiotherapist Physical therapist
Practitioner psychologists	Clinical psychologist Counselling psychologist Educational psychologist Forensic psychologist Health psychologist Occupational psychologist Practitioner psychologist Registered psychologist Sport and exercise psychologist
Prosthetist / orthotist	Prosthetist / orthotist Prosthetist Orthotist
Radiographers: diagnostic or therapeutic	Radiographer Diagnostic radiographer Therapeutic radiographer
Social workers	Social worker
Speech and language therapists	Speech and language therapist Speech therapist

About this guidance

Returners to practice

If you have successfully completed a UK approved programme more than five years ago and have been out of practice for more than two years you will need to undertake a period of updating your skills and knowledge before you can become registered. As well as the main application form, you must also complete the relevant return to practise forms which can be found on our website at: www.hcpc-uk.org/apply

General information on completing the forms

To make sure we can process your form, please complete it in black ink and block capitals. Please mark boxes with a cross. If you run out of space please continue on a separate piece of paper. You must answer all the questions as fully as possible. If you qualified over two years ago and have not practised your profession, you also need to complete the return to practice requirements and submit the relevant forms to tell us about your updating period.

Please do not send us original documents unless otherwise specified. Instead, please send certified copies of documents.

Sending us your application

Please send your application when you are ready to start practising your profession and / or using the protected title(s). Your application should be sent to the Registration Department at the contact address on the front of this form. If you have recently completed a UK approved programme, you should not send your application until you have received confirmation of your award. Applications cannot be considered unless the correct fees and all other required documents are included. All incomplete applications will be returned. The fee payable is set at £53 (which is non-refundable) plus the registration fee. If you cannot be registered your registration fee will be refunded and you will be notified in writing.

It is advisable to take a photocopy of your application for your records. It is also advisable to send your form to us by a secure method of delivery.

What happens next?

The average processing time for applications is ten working days. This time may vary depending on the volume of applications received. Once we have processed your application our online Register is immediately updated. It is the best way for you to check you are registered and for your employer to verify your registration status. The Register can be viewed on our website at www.hcpc-uk.org

Contact us

If you cannot find the answer to your query in these guidance notes please contact us. Please see page one for our contact details.

Certified documents

In the section below, we explain what documents you must send with your application to verify your identity. These documents **must be certified** as a true copy of the original by a person of professional standing in the community. This means that the person you ask to certify your document(s) must write on it 'I **certify** that this is a true copy of the original document' and must sign it and print their name and professional title. A professional person (eg a registered professional, a solicitor, barrister or other legal practitioner or an accountant) will be recognised as a person of standing in the community as will:

- a bank manager;
- a Justice of the Peace or other judicial official;
- a minister of the Church, Rabbi, Imam or other religious official acceptable to the Council;

- a Member of Parliament, Member of Scottish Parliament, Member of the Northern Ireland Assembly, Member of the Welsh Assembly;
- an Officer in HM Armed Forces;
- a teacher / lecturer; or
- a registered health and care professional.

This is not an exhaustive list and if you have any questions as to whether a person is considered to be a person of professional standing in the community please contact us.

Verifying your identity

We ask all applicants to provide us with a legible **certified** photocopy of:

- a document containing your photograph; **and**
- a document proving your current address.

Please note that as well as the above documents you will also need to attach a recent passport sized photograph on the front of the application form.

Documents you may consider sending us include:

- current signed full passport;
- national identification card and / or other valid documentation relating to immigration status and permission to work in the UK;
- current UK photo card driving licence (**Please note, the photo card and the paper part of your driving licence are considered one document**);
- current full UK driving licence (old version);
- current benefit book or card or original notification letter from the Department for Work and Pensions (DWP) confirming right to benefit;
- recent HMRC tax notification;
- marriage / civil partnership certificate;
- divorce order or dissolution order;
- confirmation from an Electoral Register*;
- recent utility bill*;
- local authority tax bill (valid for the current year);
- bank, building society or credit union statement or passbook containing current address*;
- recent mortgage statement from a recognised lender*;
- current local council rent card or tenancy agreement.

* If these documents are submitted, the date should be within the last six months. If you are sending a bank or building society or credit union statement please black out the account number and sort code details.

If you cannot provide photographic documentation

If you are unable to provide photographic documentation, you should provide us with a passport sized photograph of yourself. This should be endorsed on the back with the signature of a person of standing in the community who has known you for at least three years. The photograph should be accompanied by a signed statement from that person, indicating the period of time that you have been known to them. They should also provide us with their contact details. Please refer to Section 8 (character reference) for a list of acceptable people.

Translation of documents

If you submit documents that are not in English, you must also provide us with certified English translations. If you are applying from abroad, the British Embassy, Consulate or High Commission may be able to help you find a translator. In the UK, your own Embassy, Consulate or High Commission may be able to help.

Please note

- All completed application forms are the property of HCPC and should be returned to us.
- Please read the checklist carefully and provide all the appropriate items / documents.
- Please make sure your contact details are kept up-to-date.
- All references and the declaration of information must be dated within six months of the date your application is received by HCPC.
- We process applications for registration and tell you the decision as quickly as possible. Please do not make any arrangements or incur any expenses which depend upon the approval of your application with us. We will not accept liability for any loss or expenses incurred as a result of the above.
- It is illegal to use a protected title unless you are registered with us. It is illegal to claim you are registered with the HCPC when you are not.

Outcomes of an application

Incomplete applications

If your application is incomplete we will return it to you and ask you to resubmit it. Please do not send individual documents separate from your application as these will be returned to you. We will use the information you provide for a number of purposes. This can include contacting organisations and individuals named in your application, including professional bodies, education providers, places of work and referees.

Successful applications

If your application is successful, we will:

- put your name on the Register;
- send you a letter on the day we register you; and
- send you a registration certificate and authentication card.

With your name on our Register you will be able to practise using the relevant title(s) of your profession.

The publicly available Register shows:

- name;
- registration number;
- profession of registrant;
- duration of current registration;
- approximate geographical area in which the registrant practises (eg Guildford - not full address);
- registration status; and
- annotation (if applicable).

Rejected applications

Your application may be rejected if we believe you do not meet our standards of proficiency or our health and character requirements. Please note your application can only be assessed based on the information you provide with your form. If your application is rejected you can appeal against the decision. You may also reapply, submitting a new form, supporting documents and registration fee.

Your right of appeal against the final decision to reject your application arises if you believe that:

- the decision to reject your application is wrong; and
- you meet the standards of proficiency; and
- you meet the standards of conduct, performance and ethics.

You will need to establish the grounds for your appeal (ie why you believe that the decision taken is wrong) and follow the appeals procedure.

The appeals process

If your application is rejected you have 28 days following the date of the letter rejecting your application to write to us to appeal against the decision. We will then provide you with further information on the appeals process.

Fraudulent applications

If you falsify information about your identity or any other aspect of your application, the HCPC will suspend your application pending an investigation. If such information becomes known to us after you have been registered, an investigation will be launched and your registration may be suspended or terminated. It is a criminal offence to fraudulently obtain registration with the HCPC. You may be committing a criminal offence if you supply false information and you may be prosecuted.

Section 1 Registration details

Previous applications

If you have previously applied for registration with us or with our predecessors, the Council for Professions Supplementary to Medicine (CPSM) or the Health Professions Council (HPC) please tell us:

- your application number;
- when you applied (an approximate date if you cannot remember exactly);
- the type of application you made (eg UK, international, grandparenting); and
- any further information (eg you withdrew your application).

Section 2 Contact details

It is essential that your personal contact details are kept up-to-date. This is a requirement of the Health and Social Work Professions Order 2001. For security reasons we are unable to accept changes of personal details by email.

Name change

All name changes must be made in writing. Please also send us a **certified** photocopy of the relevant document (eg marriage certificate).

Home address

We ask you to give us your main home address. This address is not published on the publicly available Register, but is required by us for all HCPC correspondence. You can change your address over the telephone or by writing to us.

Work address

The work address you give us should be for your main place of work. Members of the public will be able to see on our Register the approximate geographical area in which you practise (eg Guildford). If you are not currently practising you can leave this section blank and contact us as soon as you are able to give us a work address. You can change your address over the telephone or by writing to us.

If you change either your home or work address during the application process or at any point thereafter, you must notify us.

Agencies

All correspondence from the HCPC will be sent to the applicant only. This means you must provide a home address and not the address of an agency. Please be aware if you provide an agency address your application will be returned to you.

Section 3 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 character raises concerns about their ability to practise safely and effectively.

When making decisions about character, we look at whether someone is of 'good character' or whether there is any evidence of past actions which might suggest that the person is not of 'good character'. Evidence that someone might not be of 'good character' could include evidence of untrustworthiness, dishonesty, actions which harmed a service user or a member of the public or actions which might affect the public's confidence in the registered professions.

When we talk about 'health' we mean health conditions which may affect an applicant's fitness to practise. We are not asking whether an applicant is 'healthy'. This is because someone may be unwell or may have a health condition which they manage appropriately but they may still be able to practise their profession safely. We do not need information about any health condition unless it affects your fitness to practise. We recognise that a disability may not be seen as a health condition. So, we only need information about a disability or health condition if it affects your fitness to practise.

Having a disability should not be seen as a barrier to becoming a health and care professional. We have produced guidance for disabled applicants called A disabled person's guide to becoming a health and care professional which you should refer to for more information on this issue.

If you answer 'yes' to any of the questions in this section, please read our brochure Guidance on health and character which can be found on our website at www.hcpc-uk.org/publications

Character

The professions regulated by the HCPC are exempt from the Rehabilitation of Offenders Act. This means we do not consider any conviction to be spent. It is important that you declare to us any convictions, police cautions or convictions for which you have received a conditional discharge. Failure to do so may result in an investigation which could lead to you being removed from the Register.

Health

You are also asked to provide us with information about your health that may affect your practice, this does not necessarily mean we will not register you. Instead, we will consider the information provided to decide whether we need to ask a registration panel to consider your application.

Vetting and Barring

Vetting and barring schemes are being introduced across the United Kingdom (UK) for those who work (whether paid or in a voluntary activity) with children and vulnerable adults. Whether you need to be registered will depend upon the nature and extent of your contact with children or vulnerable adults but, as the activities covered by the schemes include the delivery of health and social care, it is expected that the majority of HCPC registrants will need to be registered in due course.

A separate scheme will apply in Scotland from that which applies in the rest of the UK, but a barring decision made under either scheme (preventing a person from working with children and / or vulnerable adults) will apply throughout the UK. If you work both in Scotland and another part of the UK you may need to be registered under both schemes.

Both schemes are being gradually phased in over a period of years. We cannot advise you whether you need to be registered in either scheme. In order to determine if and when you need to be registered, please contact the following:

For England, Northern Ireland and Wales:

Tel: +44 (0)300 123 1111

Website: www.isa.homeoffice.gov.uk

For Scotland:

Vulnerable Groups Scheme Implementation Team
Children, Young People and Social Care Directorate
Scottish Government

Victoria Quay

Edinburgh

EH6 6QQ

Tel: +44 (0)131 244 7612

Email: pvg.enquiries@scotland.gsi.gov.uk

If you are registered under either scheme (or both) for any reason, even if it is unconnected with your professional activities (for example, because of volunteer work), you need to provide us with your registration number(s).

If you are subject to a barring decision under either scheme you need to disclose this and provide us with the details of that decision.

If you declare a health and / or character or vetting or barring issue this could be considered by a panel to determine whether you are eligible for registration.

Section 4 Education and training

Applying if you have completed a UK approved programme

Please tell us the title of your approved programme the start and end dates of your approved programme and the name of the education provider. You do not need to send us a copy of your award certificate unless you successfully completed a UK approved programme more than two years ago.

Please note:

- If you are applying for registration as a **biomedical scientist** and you have obtained a certificate of competence awarded by the Institute of Biomedical Science (IBMS) before September 2010, you must include a certified photocopy of this document with your application.
- If you are applying for registration as a **clinical scientist** and you have obtained a certificate of attainment awarded by the Association of Clinical Scientists (ACS) before September 2010, you must include a certified photocopy of this document with your application.
- If you are applying for registration as a **paramedic** and you have obtained a paramedic award from the Institute of Health Care Development (IHCD) before September 2010, you must include a certified photocopy of this document with your application.
- If you are applying for registration as a **practitioner psychologist** and hold more than one approved qualification, please complete a separate education and training form for each programme. You must include the start and end date with the title of the approved programme and the relevant education provider for each qualification obtained.

If you successfully completed a UK approved programme more than five years ago and you have not been practicing you will be subject to additional requirements. For more information, please see details on our website at www.hcpc-uk.org/apply/uk/historical/

Section 5 Practice outside the United Kingdom (UK) form

If you have not been registered for two years or more, but have practised your profession outside the UK during the last two years, you do not need to undertake a period of updating. If this applies to you, please complete Section 5 of the form and return it with your application.

If you have worked for several different employers, please photocopy or print off as many copies of this form as you need.

Section 6 Paying your fees

You must pay a scrutiny fee and a registration fee at the point of application.

Scrutiny fee

The fee we ask you to send with your application is called a scrutiny fee. This is a one off non-refundable payment of £53. We cannot process your application without this payment.

Registration fee

You must also pay your registration fee at the point you apply for registration. The registration fee for the two-year registration cycle is £152 (£76 per year). The registration fee is reduced by 50 per cent if you have successfully completed a UK approved programme within the last two years. Payments must be made in UK Sterling and drawn on a bank based in the UK. Your payment should be crossed and made payable to 'Health and Care Professions Council'. Please write your full name and address on the reverse side of your payment and ensure that it is not post-dated. Please note all amounts include the scrutiny fee.

Registration cycle

Your registration cycle is biennial (two-yearly) and is made up of two 'professional years'. The table towards the end of this section details the professional years for each profession we regulate.

Before you send us your application you need to decide whether you wish to pay the full registration fee or wish to spread the cost by paying by direct debit.

Applying within two years of completing an approved programme

If you have successfully completed a UK approved programme within the last two years you are entitled to a 50 per cent discount for the first two-year registration cycle. Your initial registration payment for the first two professional years is £76 (£38 per year).

If you do not wish to set up a direct debit you will need to pay in full by cheque or money / postal order. You need to send us a payment of £205 with your application form. Payments must be made in UK Sterling and drawn on a bank based in the United Kingdom (UK). Your payment should be crossed and made payable to 'Health and Care Professions Council'. Please write your full name and address on the reverse side of your payment and ensure that it is not post-dated.'

If you wish to spread the cost of registration please fill in the direct debit instruction. You will need to pay up-front for your first year of registration by sending us a cheque or money / postal order for £129. The remainder of your fee will be deducted from your bank account in two separate £38 instalments. Once you have been registered, we will write to you to tell you the actual dates the amounts will be deducted from your account.

Free period

If you are registered for less than six months before the start of the next professional year, you will receive this period free of charge. Please note, this free period only applies to applicants who have successfully completed a UK approved programme within the last two years. You still need to send a payment with your application but this will be used in payment for the first full professional year. If you apply at any other time, you will be charged at the reduced rate for this period in addition to the following two full professional years.

Applying if you completed a UK approved programme more than two years ago

The full registration fee is payable if you apply to be registered at any point in the professional year, even if only for a few days. If you do not need registration immediately in order to work, you may wish to check when your new professional year starts and apply for registration at the start of a new professional year. The following table shows the professional years for each profession we regulate.

Arts therapists	1 June – 31 May
Biomedical scientist	1 December – 30 November
Chiropodists / podiatrists	1 August – 31 July
Clinical scientists	1 October – 30 September
Dietitians	1 July – 30 June
Hearing aid dispensers	1 August – 31 July
Occupational therapists	1 November – 31 October
Operating department practitioners	1 December – 30 November
Orthoptists	1 September – 31 August
Paramedics	1 September – 31 August
Physiotherapists	1 May – 30 April
Practitioner psychologists	1 June – 31 May
Prosthetists / orthotists	1 October – 30 September
Radiographers	1 March – 28 February
Social workers (in England)	1 December – 30 November
Speech and language therapists	1 October – 30 September

If you do not wish to set up a direct debit you will need to pay in full by cheque or money / postal order. You need to send us a payment of £205 with your application form. Payments must be made in UK Sterling and drawn on a bank based in the United Kingdom (UK). Your payment should be crossed and made payable to 'Health and Care Professions Council'. Please write your full name and address on the reverse side of your payment and ensure that it is not post-dated.

If you wish to spread the cost of registration please fill in the direct debit instruction. You will need to pay up-front for your first year of registration by sending us a cheque or money / postal order for £129. The remainder of your fee will be deducted from your bank account in two separate £38 instalments. Once you have been registered, we will write to you to tell you the actual dates the amounts will be deducted from your account.

If you complete the direct debit mandate, please leave the 'Reference Number' section blank.

Please note:

For security reasons, HCPC does not accept cash payments. If you try to make a payment in cash at the HCPC you will be directed to the nearest post office where you can obtain a postal order.

Section 7 Declaration of information

HCPC can only process your application if you have signed this declaration. The declaration must be signed within six months of the date you send us your form. You should make sure that you fully understand the declaration before signing it. It is illegal to fraudulently procure an entry onto the HCPC Register. If you do this, you will be subject to prosecution.

Section 8 Character reference

Before being registered under the Health and Social Work Professions Order 2001 an applicant must satisfy the HCPC that they are of good character.

A character reference needs to be provided by a person of standing in the community who is not a relative of the applicant and has known the applicant for at least three years. This means that your referee must have a reputation in the community. A professional person (eg a registered professional, a solicitor, barrister or other legal practitioner or an accountant) will be recognised as a person of standing in the community as will:

- a bank manager;
- a Justice of the Peace or other judicial official;
- a minister of the Church, Rabbi, Imam or other religious official acceptable to the Council;
- a Member of Parliament, Member of Scottish Parliament, Member of the Northern Ireland Assembly, Member of the Welsh Assembly;
- an Officer in HM Armed Forces;
- a teacher / lecturer; or
- a registered health and care professional.

This is not an exhaustive list and if you have any questions as to whether a person is considered to be a person of standing in the community please contact us.

Important points:

- The character reference must be completed on a HCPC character reference form.
- References should be signed no more than six months before the submission of your application.
- Referees may charge a fee for completing your character reference form. Any costs incurred will have to be met by you.
- Referees must confirm their occupation practice or business address. All references must be completed by the referee, returned to you and forwarded with your application form to us. They must have the original signature of the referee. We cannot accept faxed, photocopied or emailed copies of reference forms.
- We cannot accept references sent directly to us by your referee.
- Please remember that should you provide fraudulent references you may be prosecuted.

After you have obtained your character reference

When your referee has completed your character reference, it should be returned to you. Please keep this in a safe place and send it to us with the rest of your application.

Appendix: Other helpful information

Our standards

Please read the following two documents before submitting your application:

- Standards of conduct, performance and ethics
- Standards of proficiency

Copies of these documents can be found on our website at www.hcpc-uk.org or by contacting us directly. Please see page one for our contact details.

Continuing professional development

As part of your registration with us, you need to carry out continuing professional development (CPD). Every time you renew your registration, you need to sign to confirm you are undertaking CPD. From July 2008 (2012 for hearing aid dispensers, 2013 for practitioner psychologists and 2014 for social workers), whenever your profession renews its registration, a percentage of your profession will be

audited to check our CPD standards are being met. To find out more about CPD, our standards and the audit process, please download from our website the brochure Your guide to our standards for continuing professional development.

How to keep your name on the Register

Once you have been registered, you will need to renew your registration every two years. To make sure your name stays on the Register, we must receive:

- your registration fee;
- your signed professional declaration; **and**
- if you are randomly selected, your CPD audit information.

We will send you a registration renewal form around three months before your registration expires.

Data protection information

Subject information statement

The Health and Care Professions Council (HCPC) processes your personal data (as defined by the Data Protection Act 1998 (the 1998 Act)) for the following purposes:

- administering your application to register with the HCPC and any subsequent renewals;
- maintaining and publishing the health and care professions Register;
- undertaking regulatory activities for the purposes of the Health and Social Work Professions Order 2001 (as amended);
- ensuring that you comply with our standards, including but not limited to, ensuring compliance with continuing professional development and educational requirements;
- investigating complaints made about you;
- investigating complaints made by you;
- publishing the results of any complaints made about you or by you;
- transferring your personal data to any other authorised body investigating your activities;
- transferring your name, profession, registration number, registration dates and approximate location of your practice to any member of the public requesting the information and making it available through the publication of the health and care professions Register;
- transferring your personal data to professional advisers and other third parties involved with the regulation of health and care professionals;
- statutory and regulatory compliance;
- monitoring equality and diversity information;
- reviewing your medical records and history, including but not limited to any medical reference supplied, to ensure that your health does not impair your fitness to practice;
- maintaining photographic images of you to ensure your identity;
- informing you about the activities of HCPC;
- marketing the activities of the HCPC;
- transferring your personal data to any business directory so as to ensure only authorised people advertise their services in such directories;
- keeping you informed about any changes to practice or legislation that may affect your practice;
- responding to requests for information from other regulators both within the European Economic Area and worldwide;
- keeping you informed about any developments, activities or products of third parties which may affect or assist your practice; and
- achieving the general and statutory objectives of the HCPC.

We collect personal information from you when you communicate with us by any media. We may also collect personal data which relate to you from third parties.

We may contact you by means of electronic communication, including but not limited to email or SMS for the purposes set out above. We will only undertake activities considered to be electronic marketing if permitted to do so by the Privacy and Electronic Communications (EC Directive) Regulations 2003.

Sensitive personal data

Certain personal information is categorised by the 1998 Act as 'Sensitive Personal Data' as defined by the 1998 Act.

In some circumstances, the HCPC will process your sensitive personal data. We are required to hold such sensitive personal data by the Health and Social Work Professions Order 2001 and therefore we do not need to obtain your consent to undertake this processing. In general, the sensitive personal data collected by HCPC is limited to information in connection with:

- your racial or ethnic origin;
- your physical or mental health or condition;
- your membership of a trade union (within the meaning of the Trade Union and Labour Relations (Consolidation) Act 1992);
- the commission or alleged commission by you of any offence;
- any proceeding taken against you for any offence committed or alleged to have been committed by you; and
- your sexual life.

Anonymisation

The HCPC is required to provide statistical information to a number of different bodies; it also undertakes its own research. In such circumstances it only provides anonymised data.

Permitted processing

The HCPC ensures that it is permitted to process your personal data. If no statutory condition applies to the form of processing we undertake, we can only undertake such processing with your consent. You may withdraw your consent to our processing your personal data for some of the above purposes by writing to the address at the end of this statement.

If a statutory condition applies allowing the HCPC to process your personal data and you withdraw consent to process your personal data this will not necessarily mean that HCPC ceases to process your personal data as the HCPC keeps personal data on registrants for their lifetime.

Sharing Your Information

In some circumstances the HCPC may be permitted by law to share sensitive personal data about you with a third party. Otherwise the HCPC does not share sensitive personal data with others without your consent. Your personal data may be shared as set out in the above purposes. If you do not wish us to share your personal data with any third party for marketing purposes, please write to us at the address at the end of this statement.

European Economic Area (EEA)

Please note that information displayed on our Website or sent to the HCPC over the internet may be transferred outside of the EEA, where data protection laws are not as strong as within the EEA. The information displayed on the website is provided as it is necessary for the public interest. In relation to any information you send via the internet or email, if you have any concerns in relation to such transfers, you should not use the internet or email as a means of communication with the HCPC.

Monitoring of telephone calls and emails

Your telephone calls and emails to us may be recorded and monitored for quality control purposes. We may also intercept communications made to individual members of staff at the HCPC when this is required for business purposes.

Notification

The HCPC has notified the Information Commissioner that it processes personal data. The notification number is Z6621691.

If you have any queries relating to this statement, please contact us by letter at the following address:

The Health and Care Professions Council
Park House
184 Kennington Park Road
London
SE11 4BU

Useful terms

Agencies – may be any third party but would usually be a commercial business that makes money (by commission) on placing applicants in employment for a fee charged to the employer. If you choose to use an agency you should make sure they are reputable. Responsibility for your application remains with you and you must provide an address where you can be sure to receive correspondence from us.

Applicant – the person making the application for entry to the Register.

Continuing professional development (CPD) – any activity which serves to maintain or improve upon professional knowledge and practice. Once registered you are required to record what CPD you undertake (see HCPC publication Continuing professional development and your registration).

Data controller – a person who either jointly, alone or in common with other people determines the purposes for which and the manner in which any personal data are, or are to be, processed.

Data processor – any person other than an employee of the data controller, who processes the personal data on behalf of the data controller.

Data protection policy – this is the HCPC's statement of how we apply and comply with the rules contained within the Data Protection Act 1998.

Data subject – an individual on whom personal data are processed.

Declaration – this is the declaration you sign as part of the application form. You are signing to confirm each of the four elements of the declaration. This declaration is legally binding and you should only sign it if you are sure the information you are providing is correct.

Home address – the address of your main or only residence. This should be an address where you can be sure to receive correspondence from HCPC as we may need to contact you regarding your application.

HCPC – Health and Care Professions Council

Health and Social Work Professions Order 2001 – the legislation that governs the registration process and confers the responsibilities and authority to the HCPC to apply and administer the registration process.

Personal data – means:

- any data from which the identity of a living individual can be determined, either by itself or with other data processed by data controller; and
- any information such as name and address, email address, telephone number and general contact details, personal data includes images on film, photographs and telephone voice recordings.

Processing – means obtaining, recording or holding the information or data or carrying out any operation or set of operations on the information or data including:

- organisation, adaptation or alteration of the information or data;
- retrieval, consultation or use of the information or data;
- disclosure of the information or data by transmission, dissemination or otherwise making available; or
- alignment, combination, blocking, erasure or destruction of the information or data.

Relative – has been broadly defined by the Health and Care Professions Council (Registration and Fees) Rules 2003 (as amended) to include in relation to any person:

- (a) his spouse or civil partner;
- (b) any lineal ancestor, lineal descendent, brother, sister, aunt, uncle, nephew, niece or first cousin, of his or of his spouse or civil partner; or
- (c) the spouse or civil partner of any relative mentioned in paragraph (b),

and for the purposes of deducing any such relationship ‘spouse or civil partner’ includes a former spouse or civil partner, a partner to whom the person is not married, and a partner of the same sex.

Sensitive personal data – means personal data consisting of information as to:

- the racial or ethnic origin of the data subject;
- political opinion;
- religious beliefs or other beliefs of a similar nature;
- whether a member of a trade union (within the meaning of the Trade Union and Labour Relations (Consolidation) Act 1992);
- physical or mental health or condition;
- sexual life;
- the commission or alleged commission of any offence; or
- any proceedings for any offence committed or alleged to have been committed, the disposal of such proceedings or the sentence of any court in such proceedings.

Work address – the main or only address of your current employment. If you are a sole practitioner and carry out home visits (eg chiropodist) then this may be the address where your practice is based. Only the area will be available to view on the public Register so your privacy and security remains protected.



Please read the guidance notes before completing this form.

Readmission application for registration (for applicants who have previously been registered)

Registration Department
184 Kennington Park Road, London, SE11 4BU

+44 (0)845 300 4472
www.hcpc-uk.org
registration@hcpc-uk.org



Before completing your application form you will need to read the guidance notes for readmission applicants and the Standards of proficiency. Please complete this form in BLOCK CAPITALS using a black pen.

Your title Mr Mrs Miss Ms other (please specify)

Your first name

Your surname / family name

Your profession

Once you have completed this application form, please make a photocopy of it and all of the supporting documents for your own records. Please send your application by secure postal method if you want to be certain of delivery.

Please make sure you have included the following documents with your application. Failure to do so will result in your application being returned to you.

Checklist – please check to ensure you have enclosed the following items with your application	Please cross
① A completed application form	<input type="checkbox"/>
② A 'Paying your fees' form with appropriate payment	<input type="checkbox"/>
③ A completed, signed and dated HCPC character reference form	<input type="checkbox"/>
④ Legible certified * copies of two appropriate documents to confirm your identity	<input type="checkbox"/>
⑤ Certified * evidence of any change of name (if applicable)	<input type="checkbox"/>
⑥ Relevant return to practice forms (if applicable)	<input type="checkbox"/>

* Please refer to guidance notes for more information regarding certification of documents.

Please also check that you have not :	<input type="checkbox"/>
① stapled any part of your application (applications are scanned and staples damage the scanner)	<input type="checkbox"/>
② placed your application in a folder, binder or plastic / paper wallet	<input type="checkbox"/>
③ included any original documents	<input type="checkbox"/>
④ included any document or item which you need to be returned (completed application forms remain the property of HCPC)	<input type="checkbox"/>

Your payment	
I enclose a cheque / money order for the amount of £ <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>	Attach a recent passport sized photograph of yourself here. Please do not staple.
For HCPC use only	
Date stamp	Date of readmission <input type="text"/>
Amount received £ <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>	Registration number <input type="text"/>
	Registered by: <input type="text"/>

Section 1 Registration details

Please provide your registration number

When did you last practice your profession? (DD/MM/YYYY)

(Do not leave blank)

I am applying for registration as a / an (see guidance notes for details of protected titles)

- Arts therapist (If you have chosen arts therapist please cross the box(es) below relevant to you)
- Art psychotherapist Art therapist
- Drama therapist Music therapist
- Biomedical scientist
- Chiropodist / podiatrist
- Clinical scientist (If you have chosen clinical scientist please cross the box(es) below relevant to you)
- Audiology Cellular science
- Clinical biochemistry Embryology
- Clinical genetics Haematology
- Clinical immunology Histocompatibility and immunogenetics
- Clinical microbiology Medical physics and clinical engineering
- Clinical physiology
- Dietitian
- Hearing aid dispenser
- Occupational therapist
- Orthoptist
- Operating department practitioner
- Paramedic
- Physiotherapist
- Practitioner psychologist (If you have chosen practitioner psychologist please cross the box(es) below relevant to you)
- Clinical psychologist Counselling psychologist
- Educational psychologist Forensic psychologist
- Health psychologist Occupational psychologist
- Sport and exercise psychologist
- Prosthetist / orthotist (If you have chosen prosthetist and orthotist please cross the box(es) below relevant to you)
- Prosthetist Orthotist
- Radiographer (If you have chosen radiographer please cross the box(es) below relevant to you)
- Diagnostic radiographer Therapeutic radiographer
- Social worker
- Speech and language therapist

Section 2 Contact details

Previous name (if applicable)

Date of birth (DD/MM/YYYY)

Nationality

National Insurance number (if applicable)

Country of birth

Town / city of birth

Gender Male Female

Home contact details

House / flat number

Street name

Town / city

County

Postcode / zipcode

Country

Telephone number

Mobile number

By providing my email address I consent to the HCPC sending me electronic marketing communications for the purposes set out in the HCPC subject information statement provided to me in the notes attached to this application form.

Email address

Work contact details

Department

Organisation

Street name

Town / city

County

Postcode / zipcode

Country

Telephone number

Mobile number

By providing my email address I consent to the HCPC sending me electronic marketing communications for the purposes set out in the HCPC subject information statement provided to me in the notes attached to this application form.

Email address

Section 3 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 character raises concerns about their ability to practise safely and effectively. Please read the accompanying guidance notes carefully before completing this section.

Have you been convicted of a criminal offence, received a police caution or been convicted of a criminal offence for which you received a conditional discharge?

Yes No If yes, please give details on a separate sheet.

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

Yes No If yes, please give details on a separate sheet.

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

Yes No If yes, please give details on a separate sheet.

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

Yes No If yes, please refer to the accompanying guidance notes for further advice and give details on a separate sheet.

Note: you will be required to make a declaration to confirm that you do not have any health condition that would impair your fitness to practise your profession at Section 6 of this form.

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? Yes No If yes, please give details on a separate sheet.

Vulnerable adults? Yes No If yes, please give details on a separate sheet.

Registration numbers

Independent Safeguarding Authority (England, Wales, Northern Ireland) registration number (if any):

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Protecting Vulnerable Groups Scheme (Scotland) registration number (if any):

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Section 4 Practice outside the United Kingdom (UK) form

If you successfully completed a UK approved programme more than five years ago, but have practised your profession outside the UK during the last two years, you do not need to undertake a period of updating. If this applied to you, please complete this form and include it with your application. If you have worked for several different employers, please photocopy or print off as many copies of this form as you need.

Applicant details

Your title Mr Mrs Miss Ms other (please specify)

Your first name

Your surname / family name

Previous name(s)

Job title / position in English

Job title / position in its original language

(if applicable)

Work details (work place / placement to which this form is relating)

Organisation

Department

Address

Town / city

County / state

Postcode / zipcode

Country

Name of manager

Contact telephone number

Contact email address

Dates you practised outside the UK (DD/MM/YYYY)

From / / to / /

Please complete one of the sections below

Whilst practising outside the UK, I was registered with the following regulator.

Name of regulator

Address

Telephone number

Website address

Your registration number (or equivalent)

My profession is not regulated in the country where I practised.

Section 5 Paying your fees – please read the guidance notes on paying your fees

Your first payment must be made by cheque or money / postal order. We do not accept bank transfers or direct debit payments for this initial fee. The fee we charge is called a readmission fee. The fee includes the first year (or part year) of registration. The fee is reduced if you are making an application for readmission within one month of the date your registration lapsed. We cannot process your application without a payment. Please make cheques payable to 'Health and Care Professions Council'.

Please choose one of the following four options.

Option 1

I am applying for readmission within one month of the date my name was lapsed from the Register. **I wish** to pay future fees by direct debit. I enclose a direct debit instruction and a cheque / money order for the amount of **£76**.

Option 2

I am applying for readmission within one month of the date my name was lapsed from the Register. **I do not** wish to pay future fees by direct debit. I enclose a cheque / money order for the amount of **£152**.

Option 3

I am applying for readmission and it has been over a month since my name was lapsed from the Register. **I wish** to pay future fees by direct debit. I enclose a direct debit instruction and a cheque / money order for the amount of **£191**.

Option 4

I am applying for readmission and it has been over a month since my name was lapsed from the Register. **I do not** wish to pay future fees by direct debit. I enclose a cheque / money order for the amount of **£267**.



Instruction to your bank or building society to pay by direct debit



Name and full postal address of your bank or building society

To the manager Bank / building society

Address

Postcode

Name(s) of account holder(s)

Bank / building society

Account number

Branch sort code

Originator's identification number 9 5 2 2 8 8

Reference Number

Instructions to your bank / building society

Please pay HCPC direct debits from the account detailed in this instruction subject to the safeguards assured by the direct debit guarantee.

The amounts are variable and will be debited every six months.

I understand that this instruction may remain with HCPC and, if so, details will be passed electronically to my bank / building society.

Date

D D M M Y Y Y Y

Signed declaration

Banks and building societies may not accept direct debit instructions for some types of account

THIS GUARANTEE SHOULD BE DETACHED AND RETAINED BY THE PAYER

The direct debit guarantee



This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits. If there are any changes to the amount, date or frequency of your Direct Debit HCPC will notify you 10 working days in advance of your account being debited or as otherwise agreed. If you request HCPC to collect a payment, confirmation of the amount and date will be given to you at the time of the request. If an error is made in the payment of your Direct Debit by HCPC or your bank or building society you are entitled to a full and immediate refund of the amount paid from your bank or building society - If you receive a refund you are not entitled to, you must pay it back when HCPC asks you to. You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us.

Section 6 Declaration of information

- **I declare** that my physical and mental health do not impair my fitness to practise the profession to which my application relates.
- **I declare** that I have read, understood and will comply with the HCPC's standards of conduct, performance and ethics.
- **I have** read the data protection information statement set out in the notes which accompany this application form and understand that the HCPC may process all of my personal data, as defined by the Data Protection Act 1998, for the purposes set out in statement. I understand that my consent is not required for the HCPC to undertake the processing required by the Health and Social Work Professions Order 2001.
- **I consent** to the HCPC processing my personal data for the purposes set out in the information statement which are not required by the Health and Social Work Professions Order 2001. I understand that I may withdraw my consent to the HCPC processing my personal data for any marketing purposes by writing to the HCPC informing it that I am withdrawing that consent.
- **I understand** that fraudulently procuring an entry in the HCPC Register is a criminal offence under article 39 of the Health and Social Work Professions Order 2001.
- **I declare** that I have read, understood and will comply with the HCPC's requirements for continuing professional development (CPD).
- **I agree** to pay the fees for my registration using the option chosen by me in Section 5.
- **I consent** to the HCPC contacting any person to gather further information on my application or to confirm the information that I have provided. I consent to any person approached by the HCPC to assist with the evaluation of my application providing the HCPC with any information held by that person in respect of me that the HCPC may request.

Date (DD/MM/YYYY)

Signature

Section 7 Character reference

Please give this section to the person you ask to complete your character reference form.

Referee's guidance on completing the character reference

Before being registered under the Health and Social Work Professions Order 2001 an applicant must satisfy the HCPC that they are of good character.

You have been asked to complete a character reference by the person who has given you this form (the applicant), because they want to be registered with the Health and Care Professions Council (HCPC).

A character reference needs to be provided by a person of standing in the community who is not a relative of the applicant and has known the applicant for at least three years. A professional person (eg a registered professional, a solicitor, barrister or other legal practitioner or an accountant) will be recognised as a person of standing in the community as will a:

- bank manager or officer;
- judge, magistrate or other judicial official;
- minister of the Church, Rabbi, Imam or other recognised religious official;
- member of a parliament or other legislative body;
- serving officer in HM Armed Forces; or
- a teacher / lecturer.

This is not an exhaustive list and if you have any questions as to whether you are able to provide a character reference please contact us on +44 (0)845 300 4472.

Once completed please return the character reference directly to the applicant.

Character reference continued

This form is to be completed by your character referee

Before being registered under the Health and Social Work Professions Order 2001 an applicant must satisfy the HCPC that they are of good character. A character reference must be provided on this form by a person of standing in the community who is not a relative of the applicant and who has known the applicant for at least three years. For a list of acceptable referees, please refer to the guidance notes for readmission applicants.

Please return this form to the applicant once complete.

Applicant details

Name	<input type="text"/>
Address	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
Profession	<input type="text"/>

Referee details

Name	<input type="text"/>
Occupation	<input type="text"/>

If you are a member of a professional or regulatory body, please provide its name and your membership / registration number

<input type="text"/>
<input type="text"/>

Practice or business address	<input type="text"/>
------------------------------	----------------------

<input type="text"/>

Telephone	<input type="text"/>
-----------	----------------------

Email address	<input type="text"/>
---------------	----------------------

Please state capacity in which you know the applicant (do not leave blank)	<input type="text"/>
--	----------------------

<input type="text"/>

I confirm that I have known the applicant for **at least three years** and know of no reason why they should not practise the above profession with honesty and integrity.

The HCPC may make further enquiries in respect of the applicant and you, as referee, to verify or clarify information about the applicant and your reference. Should any of the information you have supplied in this reference not be accurate or if you have made any false claims, you may be committing a crime.

The HCPC processes your personal data as disclosed in this reference for the purpose of administering the application to which it is attached. The HCPC may contact you to ensure that your reference is accurate and may also disclose your personal data to third parties to check its accuracy, including but not limited to checking that you are a member of a professional body. Should any inaccuracies be established, your personal data may be transferred to a third party for further investigation. Should a registrant transfer to another country, your reference may be passed to any appropriate regulators in that country.

By signing this reference you confirm that the information that you have provided is accurate and that your personal data may be processed for the purposes specified above.

Date (DD/MM/YYYY)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Signature
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Guidance for readmission applicants (applicants who have previously been registered)

✉ Registration Department
184 Kennington Park Road, London, SE11 4BU

+44 (0)845 300 4472
www.hcpc-uk.org
registration@hcpc-uk.org

hcpc health & care
professions
council

These guidance notes are intended to help you complete the application form. They will also help you understand the application process. However, if after reading the guidance notes there is something you do not understand please contact us.

Introduction

- About the Health and Care Professions Council (HCPC)
- How we are run
- About registration
- Applying for readmission
- Meeting our standards
- Protected titles

About this guidance

- Applying through the readmission process
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- General information on completing the forms
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- Continuing professional development
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Useful terms

About the HCPC

We are the Health and Care Professions Council. We are a regulator of health and care professionals and our job is to protect the health and wellbeing of people who use the services of the health and care professionals registered with us.

To protect the public, we set standards that health and care professionals must meet. Our standards cover health and care professionals' education and training, behaviour, professional skills and their health. We publish a register of health and care professionals who meet our standards.

We currently regulate 16 professions.

- Arts therapists
- Biomedical scientists
- Chiropodists / podiatrists
- Clinical scientists
- Dietitians
- Hearing aid dispensers
- Occupational therapists
- Operating department practitioners
- Orthoptists
- Paramedics
- Physiotherapists
- Practitioner psychologists
- Prosthetists / orthotists
- Radiographers
- Social workers (in England)
- Speech and language therapists

How we are run

We were created by legislation called the Health and Social Work Professions Order 2001. This lays out our responsibilities and it gives us our legal authority to carry these out. We have a Council which is made up of registered health and care professionals and members of the public. This Council sets our strategy and policy and makes sure we are fulfilling our duties under the Health and Social Work Professions Order.

About registration

Health and care professionals must register with us in order to use the protected title(s) for their profession. This means that even if you have completed a course in, for example, physiotherapy, you are still not able to call yourself a physiotherapist unless you are registered with us.

Registration shows you meet our standards for your profession. Registration shows the public that health and care professionals are fit to practise and they are entitled to use the protected title(s) for their profession. It shows the people on our Register are part of a profession with nationally recognised standards set by law.

When we say someone is 'fit to practise', we mean they have the skills, knowledge, character and health to do their job safely and effectively.

Applying for readmission

The information provided by applicants helps us to know that:

- they are who they say they are;
- they meet our standards; **and**
- we can contact them if we need to.

Meeting our standards

Everyone on our Register must meet the standards of proficiency we have set. The standards of proficiency are the professional standards which health and care professionals must meet in order to be registered. If you need a copy in an alternative format, please contact us. Our contact details can be found at the front of this form. The standards of proficiency are made up of generic standards, which all registered health and care professionals must be able to meet, and profession-specific standards, which only apply to one profession.

Protected titles

Each of the professions we regulate has at least one protected title. Anyone who uses one of these titles must be on our register. Anyone who uses a protected title who is not registered with us is breaking the law and could be prosecuted.

Part of Register	Title
Arts therapists: Art, Drama or Music	Art psychotherapist Art therapist Drama therapist Music therapist
Biomedical scientists	Biomedical scientist
Chiropodists / podiatrists	Chiropodist Podiatrist
Clinical scientists	Clinical scientist
Dietitians	Dietitian Dietician
Hearing aid dispensers	Hearing aid dispenser
Occupational therapists	Occupational therapist
Operating department practitioners	Operating department practitioner
Orthoptists	Orthoptist
Paramedics	Paramedic
Physiotherapists	Physiotherapist Physical therapist
Practitioner psychologists	Clinical psychologist Counselling psychologist Educational psychologist Forensic psychologist Health psychologist Occupational psychologist Practitioner psychologist Registered psychologist Sport and exercise psychologist
Prosthetist / orthotist	Prosthetist / orthotist Prosthetist Orthotist
Radiographers: diagnostic or therapeutic	Radiographer Diagnostic radiographer Therapeutic radiographer
Social workers	Social worker
Speech and language therapists	Speech and language therapist Speech therapist

Applying through the readmission application process

The readmission application form is for those who have been registered with us or our predecessor organisations, the Council for Professions Supplementary to Medicine (CPSM) or the Health Professions Council (HPC).

Returners to practice

If you have been out of practice for more than two years you will need to undertake a period of updating your skills and knowledge before you can become re-registered. As well as the main application form, you must also complete the relevant return to practise forms which can be found on our website: www.hcpc-uk.org/apply

General information on completing the forms

To make sure we can process your form, please complete it in black ink and block capitals. Please mark boxes with a cross. If you run out of space please continue on a separate piece of paper. You must answer all the questions as fully as possible.

Please do not send us original documents unless otherwise specified.

Sending us your application

Please send your application when you are ready to start practising your profession and / or using the protected title(s). Your application should be sent to the Registration Department at the contact address on the front of this form. Applications cannot be considered unless the correct fees and all other required documents are included. All incomplete applications will be returned. The fee payable is set at £115 (which is non-refundable) plus the registration fee. If you cannot be registered your registration fee will be refunded and you will be notified in writing.

It is advisable to take a photocopy of your application for your records. It is also advisable to send your form to us by a secure method of delivery.

What happens next?

The average processing time for applications is ten working days. This time may vary depending on the volume of applications received. Once we have processed your application our online register is immediately updated. It is the best way for you to check you are registered and for your employer to verify your registration status. The Register can be viewed on our website at www.hcpc-uk.org

Contact us

If you cannot find the answer to your query in these guidance notes please contact us. Please see page one for our contact details.

Certified documents

In the section below, we explain what documents you must send with your application to verify your identity. These documents **must be certified** as a true copy of the original by a person of professional standing in the community. This means that the person you ask to certify your document(s) must write on it 'I **certify** that this is a true copy of the original document' and must sign it and print their name and professional title. A professional person (eg a registered professional, a solicitor, barrister or other legal practitioner or an accountant) will be recognised as a person of standing in the community as will:

- a bank manager;
- a Justice of the Peace or other judicial official;
- a Minister of the Church, Rabbi, Imam or other religious official acceptable to the Council;
- a Member of Parliament, Member of Scottish Parliament, Member of the Northern Ireland Assembly, Member of the Welsh Assembly;

- an Officer in HM Armed Forces;
- a teacher / lecturer; or
- a registered health and care professional.

This is not an exhaustive list and if you have any questions as to whether a person is considered to be a person of professional standing in the community please contact us.

Verifying your identity

We ask all applicants to provide us with a legible **certified** photocopy of:

- a document containing your photograph; **and**
- a document proving your current address.

Documents you may consider sending us include:

- current signed full passport;
- national identification card and / or other valid documentation relating to immigration status and permission to work in the UK;
- current UK photo card driving licence (**Please note, the photo card and the paper part of your driving licence are considered one document**);
- current full UK driving licence (old version)
- current benefit book or card or original notification letter from the Department for Work and Pensions (DWP) confirming right to benefit;
- recent HMRC tax notification;
- marriage / civil partnership certificate;
- divorce order or dissolution order;
- confirmation from an Electoral Register*;
- recent utility bill*;
- local authority tax bill (valid for the current year);
- bank, building society or credit union statement or passbook containing current address*;
- recent mortgage statement from a recognised lender*;
- current local council rent card or tenancy agreement.

* If these documents are submitted, the date should be within the last six months. If you are sending a bank or building society or credit union statement please black out the account number and sort code details.

If you cannot provide photographic documentation

If you are unable to provide photographic documentation, you should provide us with a passport sized photograph of yourself. This should be endorsed on the back with the signature of a person of standing in the community who has known you for at least three years. The photograph should be accompanied by a signed statement from that person, indicating the period of time that you have been known to them. They should also provide us with their contact details. Please refer to Section 7 (character reference) for a list of acceptable people.

Translation of documents

If you submit documents that are not in English, you must also provide us with certified English translations. If you are applying from abroad, the British Embassy, Consulate or High Commission may be able to help you find a translator. In the UK, your own Embassy, Consulate or High Commission may be able to help.

Please note

- All application forms are the property of HCPC and should be returned to us.
- Please read the checklist carefully and provide all the appropriate items / documents.
- Please make sure your contact details are kept up to date.
- The character reference and the declaration of information must be dated within six months of the date your application is received by HCPC.
- We process applications for registration and tell you the decision as quickly as possible. Please do not make any arrangements or incur any expenses which depend upon the approval of your application with us. We will not accept liability for any loss or expenses incurred as a result of the above.
- It is illegal to use a protected title unless you are registered with us. It is illegal to claim you are registered with the HCPC when you are not.

Outcomes of an application

Incomplete applications

If your application is incomplete we will return it and ask you to resubmit it. Please do not send individual documents separate from your application as these will be returned to you. We will use the information you provide for a number of purposes. This can include contacting organisations and individuals named in your application, including professional bodies, universities, places of work and referees.

Successful applications

If your application is successful, we will:

- put your name on the Register;
- send you a letter on the day we register you; and
- send you a registration certificate and authentication card

With your name on our Register you will be able to practise using the relevant title(s) of your profession.

The publicly available Register shows:

- name;
- registration number;
- profession of registrant;
- duration of current registration;
- approximate geographical area in which the registrant practises (eg Guildford - not full address);
- registration status; and
- annotation (if applicable)

Rejected applications

Your application may be rejected if we believe you do not meet our standards of proficiency or our health and character requirements. Please note your application can only be assessed based on the information you provide with your form. If your application is rejected you can appeal against the decision. You may also reapply, submitting a new form, supporting documents and registration fee.

Your right of appeal against the final decision to reject your application arises if you believe that:

- the decision to reject your application is wrong; and
- you meet the standards of proficiency; and
- you meet the standards of conduct, performance and ethics.

You will need to establish the grounds for your appeal (ie why you believe that the decision taken is wrong) and follow the appeals procedure.

The appeals process

If your application is rejected you have 28 days following the date of the letter rejecting your application to write to us to appeal against the decision. We will then provide you with further information on the appeals process.

Fraudulent applications

If you falsify information about your identity or any other aspect of your application, the HCPC will suspend your application pending an investigation. If such information becomes known to us after you have been registered, an investigation will be launched and your registration may be suspended or terminated. It is a criminal offence to fraudulently obtain registration with the HCPC. You may be committing a criminal offence if you supply false information and you may be prosecuted.

Section 1 Registration details

Previous applications

If you have been registered with us or our predecessors the Council for Professions Supplementary to Medicine (CPSM) or the Health Professions Council (HPC), please tell us your registration number and the date you last practised your profession.

Section 2 Contact details

It is essential that your personal contact details are kept up to date. This is a requirement of the Health and Social Work Professions Order 2001. For security reasons we are unable to accept changes of personal details by email.

Name change

All name changes must be made in writing. Please also send us a **certified** photocopy of the relevant document (eg marriage certificate).

Home address

We ask you to give us your main home address. This address is not published on the publicly available register, but is required by us for all HCPC correspondence. You can change your address over the telephone or by writing to us.

Work address

The work address you give us should be for your main place of work. Members of the public will be able to see on our Register the approximate geographical area in which you practise (eg Guildford). If you are not currently practising you can leave this section blank and contact us as soon as you are able to give us a work address. You can change your address over the telephone or by writing to us.

If you change either your home or work address during the application process or at any point thereafter, you must notify us.

Agencies

All correspondence from the HCPC will be sent to the applicant only. This means you must provide a home address and not the address of an agency. Please be aware if you provide an agency address your application will be returned to you.

Section 3 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 character raises concerns about their ability to practise safely and effectively.

When making decisions about character, we look at whether someone is of 'good character' or whether there is any evidence of past actions which might suggest that the person is not of 'good character'. Evidence that someone might not be of 'good character' could include evidence of untrustworthiness, dishonesty, actions which harmed a service user or a member of the public or actions which might affect the public's confidence in the registered professions.

When we talk about 'health' we mean health conditions which may affect an applicant's fitness to practise. We are not asking whether an applicant is 'healthy'. This is because someone may be unwell or may have a health condition which they manage appropriately but they may still be able to practise their profession safely. We do not need information about any health condition unless it affects your fitness to practise. We recognise that a disability may not be seen as a health condition. So, we only need information about a disability or health condition if it affects your fitness to practise.

Having a disability should not be seen as a barrier to becoming a health and care professional. We have produced guidance for disabled applicants called A disabled person's guide to becoming a health and care professional which you should refer to for more information on this issue.

If you answer 'yes' to any of the questions in this section, please read our brochure Guidance on health and character which can be found on our website at www.hcpc-uk.org/publications

Character

The professions regulated by the HCPC are exempt from the Rehabilitation of Offenders Act. This means we do not consider any conviction to be spent. It is important that you declare to us any convictions, police cautions or convictions for which you have received a conditional discharge. Failure to do so may result in an investigation which could lead to you being removed from the Register.

Health

You are also asked to provide us with information about your health that may affect your practice, this does not necessarily mean we will not register you. Instead, we will consider the information provided to decide whether we need to ask a registration panel to consider your application.

Vetting and Barring

Vetting and barring schemes are being introduced across the United Kingdom (UK) for those who work (whether paid or in a voluntary activity) with children and vulnerable adults. Whether you need to be registered will depend upon the nature and extent of your contact with children or vulnerable adults but, as the activities covered by the schemes include the delivery of health and social care, it is expected that the majority of HCPC registrants will need to be registered in due course.

A separate scheme will apply in Scotland from that which applies in the rest of the UK, but a barring decision made under either scheme (preventing a person from working with children and / or vulnerable adults) will apply throughout the UK. If you work both in Scotland and another part of the UK you may need to be registered under both schemes.

Both schemes are being gradually phased in over a period of years. We cannot advise you whether you need to be registered in either scheme. In order to determine if and when you need to be registered, please contact the following:

For England, Northern Ireland and Wales:

Tel: +44 (0)300 123 1111

Website: www.crb.homeoffice.gov.uk/faqs/vetting_and_barring_scheme.aspx

For Scotland:

Vulnerable Groups Scheme Implementation Team
Children, Young People and Social Care Directorate
Scottish Government

Victoria Quay

Edinburgh

EH6 6QQ

Tel: +44 (0)131 244 7612

Email: pvg.enquiries@scotland.gsi.gov.uk

If you are registered under either scheme (or both) for any reason, even if it is unconnected with your professional activities (for example, because of volunteer work), you need to provide us with your registration number(s).

If you are subject to a barring decision under either scheme you need to disclose this and provide us with the details of that decision.

If you declare a health and / or character or vetting or barring issue this could be considered by a panel to determine whether you are eligible for registration.

Section 4 Practice outside the United Kingdom (UK) form

If you completed your approved qualification more than five years ago, but have practised your profession outside the UK during the last two years, you do not need to undertake a period of updating. If this applies to you, please complete this form at Section 4 of the form and return it with your application.

If you have worked for several different employers, please photocopy or print off as many copies of this form as you need.

Section 5 Paying your fees

Readmission fee

The fee we ask you to send with your application is called a readmission fee. This is a non-refundable payment of £191 and includes the first year (or part year) of registration. We cannot process your application without this payment. The readmission fee is not payable if your name was lapsed from the Register less than a month from the date we receive your application.

You must also pay your registration fee at the point you apply for readmission. The registration fee for the two year registration cycle is £152 (£76 per year). If you apply to be registered at any point during the professional year, even if only for a few days, you will need to pay the full £76. Payments must be made in UK Sterling and drawn on a bank based in the UK. Your payment should be crossed and made payable to 'Health and Care Professions Council'. Please write your full name and full address on the reverse side of your payment and ensure that it is not post-dated. If you do not need registration immediately in order to work, you may wish to check when your new professional year starts and apply for registration at the start of a new professional year. The table below shows the registration cycles for

each profession. Please then refer to the set of options in the application form.

Registration cycle

Your registration cycle is biennial (two-yearly) and is made up of two 'professional years'. The table below details the professional years for each profession we regulate.

Arts therapists	1 June – 31 May
Biomedical scientists	1 December – 30 November
Chiropodists / podiatrists	1 August – 31 July
Clinical scientists	1 October – 30 September
Dietitians	1 July – 30 June
Hearing aid dispensers	1 August – 31 July
Occupational therapists	1 November – 31 October
Operating department practitioners	1 December – 30 November
Orthoptists	1 September – 31 August
Paramedics	1 September – 31 August
Physiotherapists	1 May – 30 April
Practitioner psychologists	1 June – 31 May
Prosthetists / orthotists	1 October – 30 September
Radiographers	1 March – 28 February
Social workers (in England)	1 December – 30 November
Speech and language therapists	1 October – 30 September

Before you send us your application you need to decide whether you wish to pay the full registration fee or spread the cost by paying by direct debit. If you complete the direct debit mandate, please leave the 'Reference Number' section blank.

Section 6 Declaration of information

HCPC can only process your application if you have signed this declaration. You should make sure that you fully understand the declaration before signing it. It is illegal to fraudulently procure an entry onto the HCPC Register. If you do this, you will be subject to prosecution.

Section 7 Character reference

Before being registered under the Health and Social Work Professions Order 2001 an applicant must satisfy the HCPC that they are of good character.

A character reference needs to be provided by a person of standing in the community who is not a relative of the applicant and has known the applicant for at least three years. This means that your referee must have a reputation in the community. A professional person (eg a registered professional, a solicitor, barrister or other legal practitioner or an accountant) will be recognised as a person of standing in the community as will:

- a bank manager;
- a Justice of the Peace or other judicial official;
- a minister of the Church, Rabbi, Imam or other religious official acceptable to the Council;
- a Member of Parliament, Member of Scottish Parliament, Member of the Northern Ireland Assembly, Member of the Welsh Assembly;
- an Officer in HM Armed Forces;
- a teacher / lecturer; or
- a registered health and care professional.

This is not an exhaustive list and if you have any questions as to whether a person is considered to be a person of standing in the community please contact us.

Important points

- The character reference must be completed on a HCPC character reference form.
- References should be signed no more than six months before the submission of your application.
- Referees may charge a fee for completing your character reference form. Any costs incurred will have to be met by you.
- Referees must confirm their occupation practice or business address. All references must be completed by the referee, returned to you and forwarded with your application form to us. They must have the original signature of the referee. We cannot accept faxed, photocopied or emailed copies of reference forms.
- We cannot accept references sent directly to us by your referee.
- Please remember that if you provide fraudulent references you may be prosecuted.

After you have obtained your character reference

When your referee has completed your character reference, it should be returned to you. Please keep this in a safe place and send it in to us with the rest of your application.

Appendix: other helpful information

Our standards

Please read the following two documents before submitting your application:

- Standards of conduct, performance and ethics
- Standards of proficiency

Copies of these documents can be found on our website at www.hcpc-uk.org or by contacting us directly. Please see page one for our contact details.

Continuing professional development

As part of your registration with us, you need to carry out continuing professional development (CPD). Every time you renew your registration, you need to sign to confirm you are undertaking CPD. From July 2008 (2012 for hearing aid dispensers, 2013 for practitioner psychologists and 2014 for social workers), whenever your profession renews its registration, a percentage of your profession will be audited to check our CPD standards are being met. To find out more about CPD, our standards and the audit process, please download from our website the brochure *Your guide to our standards for continuing professional development*.

How to keep your name on the Register

Once you have been registered, you will need to renew your registration every two years. To make sure your name stays on the Register, we must receive:

- your registration fee;
- your signed professional declaration; and
- if you are randomly selected, your CPD audit information.

We will send you a registration renewal form around three months before your registration expires.

Subject information statement

The Health and Care Professions Council (HCPC) processes your personal data (as defined by the Data Protection Act 1998 (the 1998 Act)) for the following purposes:

- administering your application to register with the HCPC and any subsequent renewals;
- maintaining and publishing the health and care professions Register;
- undertaking regulatory activities for the purposes of the Health and Social Work Professions Order 2001 (as amended);
- ensuring that you comply with our standards, including but not limited to, ensuring compliance with continuing professional development and educational requirements;
- investigating complaints made about you;
- investigating complaints made by you;
- publishing the results of any complaints made about you or by you;
- transferring your personal data to any other authorised body investigating your activities;
- transferring your name, profession, registration number, registration dates and approximate location of your practice to any member of the public requesting the information and making it available through the publication of the health and care professions Register;
- transferring your personal data to professional advisors and other third parties involved with the regulation of health and care professionals;
- statutory and regulatory compliance;
- monitoring equality and diversity information;
- reviewing your medical records and history, including but not limited to any medical reference supplied, to ensure that your health does not impair your fitness to practice;
- maintaining photographic images of you to ensure your identity;
- informing you about the activities of HCPC;
- marketing the activities of the HCPC;
- transferring your personal data to any business directory so as to ensure only authorised people advertise their services in such directories;
- keeping you informed about any changes to practice or legislation that may affect your practice;
- responding to requests for information from other regulators both within the European Economic Area and worldwide;
- keeping you informed about any developments, activities or products of third parties which may affect or assist your practice; and
- achieving the general and statutory objectives of the HCPC.

We collect personal information from you when you communicate with us by any media. We may also collect personal data which relate to you from third parties.

We may contact you by means of electronic communication, including but not limited to email or SMS for the purposes set out above. We will only undertake activities considered to be electronic marketing if permitted to do so by the Privacy and Electronic Communications (EC Directive) Regulations 2003.

Sensitive personal data

Certain personal information is categorised by the 1998 Act as 'Sensitive Personal Data' as defined by the 1998 Act.

In some circumstances, the HCPC will process your sensitive personal data. We are required to hold such sensitive personal data by the Health and Social Work Professions Order 2001 and therefore we do not need to obtain your consent to undertake this processing. In general, the sensitive personal data collected by HCPC is limited to information in connection with:

- your racial or ethnic origin;
- your physical or mental health or condition;
- your membership of a trade union (within the meaning of the Trade Union and Labour Relations (Consolidation) Act 1992);
- the commission or alleged commission by you of any offence;
- any proceeding taken against you for any offence committed or alleged to have been committed by you; and
- your sexual life.

Anonymisation

The HCPC is required to provide statistical information to a number of different bodies; it also undertakes its own research. In such circumstances it only provides anonymised data.

Permitted processing

The HCPC ensures that it is permitted to process your personal data. If no statutory condition applies to the form of processing we undertake, we can only undertake such processing with your consent. You may withdraw your consent to our processing your personal data for some of the above purposes by writing to the address at the end of this statement.

If a statutory condition applies allowing the HCPC to process your personal data and you withdraw consent to process your personal data this will not necessarily mean that HCPC ceases to process your personal data as the HCPC keeps personal data on registrants for their lifetime.

Sharing your information

In some circumstances the HCPC may be required by law to share sensitive personal data about you to a third party. Otherwise the HCPC does not share sensitive personal data outside of the HCPC Group without your consent. Your personal data may be shared as set out in the above purposes. If you do not wish us to share your personal data with any third party for marketing purposes, please write to us at the address at the end of this statement.

European Economic Area (EEA)

Please note that information displayed on our Website or sent to the HCPC over the internet may be transferred outside of the EEA, where data protection laws are not as strong as within the EEA. The information displayed on the website is provided as it is necessary for the public interest. In relation to any information you send via the internet or email, if you have any concerns in relation to such transfers, you should not use the internet or email as a means of communication with the HCPC.

Monitoring of telephone calls and emails

Your telephone calls and emails to us may be recorded and monitored for quality control purposes. We may also intercept communications made to individual members of staff at the HCPC when this is required for business purposes.

Notification

The HCPC has notified the Information Commissioner that it processes personal data. The notification number is Z6621691.

If you have any queries relating to this statement, please contact us by letter at the following address:

The Health and Care Professions Council
Park House
184 Kennington Park Road
London
SE11 4BU

Useful terms

Agencies – may be any third party but would usually be a commercial business that makes money (by commission) on placing applicants in employment for a fee charged to the employer. If you choose to use an agency you should make sure they are reputable. Responsibility for your application remains with you and you must provide an address where you can be sure to receive correspondence from us.

Applicant – the person making the application for entry to the Register.

Continuing professional development (CPD) – any activity which serves to maintain or improve upon professional knowledge and practice. Once registered you are required to record what CPD you undertake (see HCPC publication Continuing professional development and your registration).

Data controller – a person who either jointly, alone or in common with other people determines the purposes for which and the manner in which any personal data are, or are to be, processed.

Data processor – any person other than an employee of the data controller, who processes the personal data on behalf of the data controller.

Data protection policy – this is the HCPC's statement of how we apply and comply with the rules contained within the Data Protection Act 1998.

Data subject – an individual on whom personal data are processed.

Declaration – this is the declaration you sign as part of the application form. You are signing to confirm each of the four elements of the declaration. This declaration is legally binding and you should only sign it if you are sure the information you are providing is correct.

Home address – the address of your main or only residence. This should be an address where you can be sure to receive correspondence from HCPC as we may need to contact you regarding your application.

HCPC – Health and Care Professions Council

Health and Social Work Professions Order 2001 – the legislation that governs the registration process and confers the responsibilities and authority to the HCPC to apply and administer the registration process.

Personal data – means:

- any data from which the identity of a living individual can be determined, either by itself or with other data processed by data controller; and
- any information such as name and address, email address, telephone number and general contact details, personal data includes images on film, photographs and telephone voice recordings.

Processing – means obtaining, recording or holding the information or data or carrying out any operation or set of operations on the information or data including:

- organisation, adaptation or alteration of the information or data;
- retrieval, consultation or use of the information or data;
- disclosure of the information or data by transmission, dissemination or otherwise making available; or
- alignment, combination, blocking, erasure or destruction of the information or data.

Relative – has been broadly defined by the Health and Care Professions Council (Registration and Fees) Rules 2003 (as amended) to include in relation to any person:

- (a) his spouse or civil partner;
- (b) any lineal ancestor, lineal descendent, brother, sister, aunt, uncle, nephew, niece or first cousin, of his or of his spouse or civil partner; or
- (c) the spouse or civil partner of any relative mentioned in paragraph (b),

and for the purposes of deducing any such relationship ‘spouse or civil partner’ includes a former spouse or civil partner, a partner to whom the person is not married, and a partner of the same sex.

Sensitive personal data – means personal data consisting of information as to:

- the racial or ethnic origin of the data subject;
- political opinion;
- religious beliefs or other beliefs of a similar nature;
- whether a member of a trade union (within the meaning of the Trade Union and Labour Relations (Consolidation) Act 1992);
- physical or mental health or condition;
- sexual life;
- the commission or alleged commission of any offence; or
- any proceedings for any offence committed or alleged to have been committed, the disposal of such proceedings or the sentence of any court in such proceedings.

Work address – the main or only address of your current employment. If you are a sole practitioner and carry out home visits (eg chiropodist) then this may be the address where your practice is based. Only the area will be available to view on the public Register so your privacy and security remains protected.

Updating Period Cover Sheet

This is a summary sheet for your period of updating. For more information about your period of updating, please see the guidance notes. Please fill in a form for each activity you have completed, and use this form to summarise the information, so it is clear which activities you have completed.

For more information, please see the guidance notes for returning to practice.

You must fill in this section

Your Health and Care Professions Council registration number (if you have one):

Surname / family name

First name(s)

Date you last practised your profession (DD/MM/YYYY):

Updating period

Total number of supervised practice days you have completed.

days

Total number of formal study days you have completed.

days

Total number of private study days you have completed.

days

Total number of updating days you have completed:

days

Have you enclosed the relevant forms relating to your period of updating?

 Yes No

I confirm that I have completed the period of updating set out above and I enclose the relevant forms to confirm this. As far as I know, all the information in my application is true. I understand that, under the Health and Social Work Professions Order 2001, it is a criminal offence to fraudulently enter my name on the register.

Signed

Date (DD/MM/YYYY)

Please ask someone from your part of the Register to fill in this section.

I confirm that, as far as I know, the information the applicant has provided about their period of updating is correct.

Print name

Signed

Date (DD/MM/YYYY)

HCPC registration number:

Supervised Practice Form

This form is for you to provide details of any supervised practice you have done as part of your period of updating. If you do more than one period of supervised practice, please photocopy or print off as many copies of this form as you need.

For more information, please see the guidance notes for returning to practice.

You must fill in this section

Your Health and Care Professions Council registration number (if you have one)

Surname / family name

First name(s)

Please tell us where you did your period of supervised practice.

Organisation name

Department / unit

Address and postcode

Telephone number: (inc international and STD code)

Please tell us the date you did your period of supervised practice (DD/MM/YYYY):

From / / to / /

Please give us the name and registration number of the person who supervised your period of supervised practice.

Print name

HCPC registration number

The supervisor must fill in this section

I confirm that the applicant has completed the period of supervised practice set out above. As far as I know, all the information in this form is true.

Name of supervisor

HCPC registration number

Signed

Date (DD/MM/YYYY)

We may make more enquiries to check any part of this form.

Guidance notes for returning to practice

Please read carefully **before** completing forms.

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Section 1: Introduction

We have written this guidance for:

- health and care professionals who were previously registered with us and now want to return to the register (returners); and
- people applying to register for the first time, who completed their approved qualification more than five years ago (an historic qualification).

Our requirements:

Number of years out of practice	Conditions
0 to 2	No requirements
2 to 5	30 days of updating your skills and knowledge
5 or more	60 days of updating your skills and knowledge

You do not need to go through the Return to Practice process if you have been practising your profession in the last two years (you will need to follow the standard application process).

Period of updating

Your period of updating your knowledge and skills can be made up of any combination of:

- supervised practice;
- formal study; or
- private study.

Our only requirement is that any private study makes up no more than half of the updating period.

For example, if you needed to do 30 days updating, you could do this by completing:

- 30 days supervised practice;
- 10 days supervised practice, 10 days private study, and 10 days formal study; or
- 15 days private study and 15 days formal study.

This is not a complete list. The above are just examples to show how our requirements are flexible enough to meet your needs.

Your responsibility

You are responsible for your own period of updating, and for making sure that you meet our standards before you return to practice. We will ask you for information so that we can check that your updating period took place, but you are responsible for your learning, and for deciding whether this updating will allow you to practise safely and effectively.

Section 2: Structuring your period of updating

Timeframe

You can do your period of updating either full- or part-time. For the purpose of filling in your forms, we consider one day as being equal to seven hours.

You do not have to complete your entire period of updating in one go. Our only condition is that all of your updating should be completed within the twelve months before you apply for registration.

Content

The areas of your profession that you need to update will depend on:

- the area in which you are going to work when you begin practising again;
- your previous experience;
- any relevant skills you gained while you were out of practice; and
- any relevant developments in your profession while you were out of practice.

Section 3: Filling in your forms to return to practice

You will need to fill in an 'Updating period cover sheet', and a separate form for each type of activity that you do, to give us information about your period of updating.

For example, if you needed to do 30 days updating, and you did this by completing:

- 20 days supervised practice; and
- 10 days private study;

You would need to fill in an 'Updating period cover sheet', a 'Supervised practice form' and a 'Private study form'. As you have not done any formal study, you would not need to fill in a 'Formal study form'.

Section 3a: Filling in your updating cover sheet

You will need to fill in an 'Updating period cover sheet'.

Your countersignatory

When you have completed your period of updating, you need to ask someone from your part of the Register (same profession) to sign your 'Updating period cover sheet', to confirm that you have completed the updating. The person who signs this does not need to physically supervise every day of your updating, and they do not need to confirm that you are fit to practise. They just need to take reasonable steps to be sure that you have done the number of days needed. For example, they might ask to see your certificate from any formal study, or they might ask to see any notes from your private study.

It is your responsibility to make sure that the person who signs the cover sheet is on the relevant part (same profession) of the HCPC register. You can do this by checking our on-line register at www.hcpc-uk.org or by contacting our Registration Department, whose details are at the end of these guidance notes. You must also make sure that they have no fitness to practise proceedings or orders have been made against them.

Section 3b: Filling in your supervised practice form

If you chose to do supervised practice as part of your period of updating, you will need to fill in the 'Supervised practice form'.

Supervised practice is a period during which you practice under the supervision of a registered health and care professional.

During a period of supervised practice, you may have the option of being employed as an assistant in your profession, but you do not have to be employed as an assistant. To complete a period of supervised practice, you will need to identify a supervisor.

It is your responsibility to make sure that your supervisor is on the relevant part (same profession) of the HCPC register. You can do this by checking our online register at www.hcpc-uk.org or by contacting our Registration Department, whose details are at the end of these guidance notes. You must also make sure that they have been in regulated practice for at least the previous three years, and no fitness to practise proceedings or orders have been made against them.

We do not set detailed requirements about the level of supervision needed, or the tasks that you need to do. We believe that you should discuss this with your supervisor.

Your supervisor should only supervise those activities which are within their own scope of practice. This is so that your supervisor can provide relevant input and guidance, and also to make sure that both you and your supervisor are practising safely and effectively. This means that your period of supervised practice does not have to be solely in clinical practice, but could be done, for example, in teaching, management, research or wherever your supervisor practises their profession.

Section 3c: Filling in your private study form

If you chose to do private study as part of your period of updating, you will need to fill in the 'Private study form'.

Private study is a period of study which you structure yourself. If you choose to use private study as part of your updating, you could use resources such as:

- on-line information;
- libraries; and
- journals.

You may find private study a particularly useful option if you plan to return to a field which is extremely specialised, where there may be limited opportunities for formal study or supervised practice. It may also be useful if you live in an area where it is difficult to gain a period of supervised practice or if you need to fit your updating period around other demands on your time, such as another job or caring responsibilities. However, you should be aware that private study can only make up a maximum of half of your total period (for example, 15 of your 30 days updating, or 30 of your 60 days updating).

Section 3d: Filling in your formal study form

If you chose to do formal study as part of your period of updating, you will need to fill in the 'Formal study form'.

Formal study is a period of structured study which is provided by a person or organisation. This can include distance learning or learning over the internet, or any other type of course or programme that is relevant to your practice.

Types of formal study that you might choose to take could include:

- 'return to practice' programmes run by educational institutions, health trusts, health boards or other organisations;
- relevant 'continuing professional development' courses; and
- relevant modules or elements currently included in:
 - o programmes run by educational institutions; or
 - o programmes offered by professional organisations.

We don't approve return to practice courses because we believe that you are the best person to decide which courses are most appropriate and which types of formal study will best update your skills and knowledge so that you can start to practise again.

Section 4: Next steps

Processing your information

We will check the information you send us to see that you have completed the correct number of days. We may contact you or the organisations or individuals involved to get more information, or to check the information that you have provided. For example, we will look at our Register to check that your supervisor is registered with us and does not have any fitness to practise action against them. We may also contact the organisation that provided your formal study to check that they have a record that you completed the course.

Contact us

If you have a question about your application, please contact us in one of the following ways.

- Post: Registration Department, 184 Kennington Park Road, London, SE11 4BU
- Phone: +44 (0)845 300 4472, we are open Monday to Friday, 8am to 6pm.
- Email: registration@hcpc-uk.org
- Website: www.hcpc-uk.org

 **Please read the guidance notes before completing this form.**

International application for registration (for applicants who hold a qualification or have gained experience outside the UK)

Registration Department
184 Kennington Park Road, London, SE11 4BU

+44 (0)845 300 4472 or +44 (0)20 7582 5460

www.hcpc-uk.org

registration@hcpc-uk.org



Before completing your application form you will need to read the guidance notes for International applicants and the standards of proficiency for your profession. Please complete this form in BLOCK CAPITALS using a black pen.

Your title Mr Mrs Miss Ms other (please specify)

Your first name

Your surname / family name

Your profession

Once you have completed this application form, please make a photocopy of it and all of the supporting documents for your own records. Please send your application by a secure postal method if you want to be certain of delivery.

Please make sure you have included the following documents with your application. Failure to do so will result in your application being returned to you.

Checklist – please check to ensure you have enclosed the following items with your application	Please cross
① A completed application form	<input type="checkbox"/>
② A 'Paying your scrutiny fee' form with scrutiny fee of £420	<input type="checkbox"/>
③ A photocopy of an eligible language test certificate or declaration that English is your first language or proof of exemption by virtue of being an EEA citizen	<input type="checkbox"/>
④ A completed, signed and dated HCPC character reference form	<input type="checkbox"/>
⑤ Certified* copies of two appropriate documents to confirm your identity	<input type="checkbox"/>
⑥ Certified* evidence of any change of name (if applicable)	<input type="checkbox"/>
⑦ A legible certified* copy of your qualification certificate(s) and certified translation (if applicable)	<input type="checkbox"/>
⑧ A certificate of professional status from the regulator in the country where you last practised (if applicable). Applicants wishing to exercise EEA mutual recognition rights, please include the attestation of legal establishment in another EEA state.	<input type="checkbox"/>
⑨ Professional reference(s)	<input type="checkbox"/>
⑩ A legible certified* course information form	<input type="checkbox"/>
⑪ Background check consent form	<input type="checkbox"/>

* Please refer to guidance notes for more information regarding certification of documents.

Please also check that you have not :	<input type="checkbox"/>
① stapled any part of your application (applications are scanned and staples damage the scanner)	<input type="checkbox"/>
② placed your application in a folder, binder or plastic / paper wallet	<input type="checkbox"/>
③ included any original documents	<input type="checkbox"/>
④ included any document or item which you need to be returned (completed application forms remain the property of HCPC)	<input type="checkbox"/>

Your scrutiny fee	
<input type="checkbox"/> I enclose a cheque / money order for the amount of £420	Attach a recent passport sized photograph of yourself here. Please do not staple.
<input type="checkbox"/> I wish to pay by credit / debit card and enclose a 'paying your scrutiny fee' form with my account details.	

For HCPC use only	
Date stamp	Date of registration <input type="text"/>
Amount received £ <input type="text"/> . <input type="text"/>	Registration number <input type="text"/>
Application number <input type="text"/>	Registered by: <input type="text"/>
Application checked by: <input type="text"/>	

Section 1 Registration details

Have you ever previously applied for registration with the HCPC or the Health Professions Council (HPC)? Yes No

If yes, please give your application number

I am applying for registration as a / an (see guidance notes for details of protected titles)

- Arts therapist (If you have chosen arts therapist please cross the box(es) below relevant to you)
- Art psychotherapist Art therapist
- Drama therapist Music therapist
- Biomedical scientist
- Chiropodist / podiatrist
- Clinical scientist (If you have chosen clinical scientist please cross the box(es) below relevant to you)
- Audiology Cellular science
- Clinical biochemistry Embryology
- Clinical genetics Haematology
- Clinical immunology Histocompatibility and immunogenetics
- Clinical microbiology Medical physics and clinical engineering
- Clinical physiology
- Dietitian
- Hearing aid dispenser
- Occupational therapist
- Orthoptist
- Operating department practitioner
- Paramedic
- Physiotherapist
- Practitioner psychologist (If you have chosen practitioner psychologist please cross the box(es) below relevant to you)
- Clinical psychologist Counselling psychologist
- Educational psychologist Forensic psychologist
- Health psychologist Occupational psychologist
- Sport and exercise psychologist
- Prosthetist / orthotist (If you have chosen prosthetist and orthotist please cross the box(es) below relevant to you)
- Prosthetist Orthotist
- Radiographer (If you have chosen radiographer please cross the box(es) below relevant to you)
- Diagnostic radiographer Therapeutic radiographer
- Social worker
- Speech and language therapist

Section 3 Regulatory body

Is your profession regulated in the jurisdiction where you currently (or most recently) live and / or work? Yes No

If yes, please state:
 The name of the regulatory body

[Grid for name of regulatory body]

Name of country / jurisdiction

[Grid for name of country / jurisdiction]

Email address of the regulator

[Grid for email address of the regulator]

Are you registered with the regulatory body in that jurisdiction? Yes No
 (this includes any form of provisional, limited or student registration)

If yes, please state:
 Your registration / licence number

[Grid for registration / licence number]

The professional title under which you are registered

[Grid for professional title]

Dates of practice (DD/MM/YYYY): from [][] [][] [][][][] to [][] [][] [][][][]

Have you ever taken a qualifying or entrance examination for your profession (eg licensing or registration board exam), other than one which formed part of your professional education? Yes No
 If 'Yes', please provide details and evidence of the marks / grades you achieved.

Applicants exercising EEA mutual recognition rights, please include the proof of legal establishment (see guidance note for more information).

Section 4 Professional body membership

4.1 Please give details of any relevant professional bodies of which you are or have been a member.

Name of professional body	Contact details including address, email, and website address	Membership number	Date joined	Date membership expired (if applicable)	Length of membership (MMYY)
[Grid for name of professional body]	[Grid for contact details]	[Grid for membership number]	[Grid for date joined]	[Grid for date membership expired]	[][][][][]
[Grid for name of professional body]	[Grid for contact details]	[Grid for membership number]	[Grid for date joined]	[Grid for date membership expired]	[][][][][]
[Grid for name of professional body]	[Grid for contact details]	[Grid for membership number]	[Grid for date joined]	[Grid for date membership expired]	[][][][][]

Section 5 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 character raises concerns about their ability to practise safely and effectively. Please read the accompanying guidance notes carefully before completing this section.

Have you been convicted of a criminal offence or received a conditional discharge or police caution for a criminal offence?

Yes No If yes, please give details on a separate sheet.

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

Yes No If yes, please give details on a separate sheet.

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

Yes No If yes, please give details on a separate sheet.

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

Yes No If yes, please refer to the accompanying guidance notes for further advice and give details on a separate sheet.

Note: you will be required to make a declaration to confirm that you do not have any health condition that would impair your fitness to practise your profession at Section 11 of this form.

Are you or have you ever been barred under the Safeguarding Vulnerable Groups Act 2006, Safeguarding Vulnerable Groups (Northern Ireland) Order 2007 or the Protection of Vulnerable Groups (Scotland) Act 2007 from working with:

Children? Yes No If yes, please give details on a separate sheet.

Vulnerable adults? Yes No If yes, please give details on a separate sheet.

Registration numbers

Independent Safeguarding Authority (England, Wales, Northern Ireland) registration number (if any):

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Protecting Vulnerable Groups Scheme (Scotland) registration number (if any):

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Section 6 Education and training

Please provide details of your professional education and training (ie your qualification for the profession within which you are seeking registration)

Title of your relevant qualification
(as it appears on your certificate)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Course start date (DD/MM/YYYY)

--	--	--	--	--	--	--	--	--	--

Course end date (DD/MM/YYYY)

--	--	--	--	--	--	--	--	--	--

Name of educational institution

Street name

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Town / city

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

County / state

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Postcode / zipcode

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Please advise contact details for the course administrator if possible.

Name

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Job title

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Telephone number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Email

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

If you have gained a further professional qualification relevant to your registration please provide details

Title of your relevant qualification

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Course start date (DD/MM/YYYY)

--	--	--	--	--	--	--	--	--	--

Course end date (DD/MM/YYYY)

--	--	--	--	--	--	--	--	--	--

Name of educational institution

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Street name

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Town / city

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

County / state

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Postcode / zipcode

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Please continue on a separate sheet if necessary.

Please advise contact details for the course administrator if possible.

Name

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Job title

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Telephone number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Email

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Section 7 Language proficiency

Please refer to point seven of the standards of conduct performance and ethics. Every registrant must ensure that they can communicate effectively with patients, clients, users, carers and other professionals.

Is English your **first** language? **You should only indicate that English is your first language if it is the main or only language you use on a day-to-day basis.** Having studied English or undertaken education or training at an institution where the medium of instruction is English does not necessarily mean that English is your first language.

Yes No

If no, you must provide proof of your English proficiency **unless you are exempt because you are a citizen of a relevant European State.** Please refer to guidance notes for details of recognised language tests and the minimum acceptable scores. Please state **either**:

1) which language test you have included and state your score;
.....

or

2) the relevant European State of which you are a citizen (this must be confirmed by a certified photocopy of the relevant page of your passport) or other evidence of citizenship.
.....

Austria	Finland	Liechtenstein	Romania
Belgium	France	Lithuania	Slovakia
Bulgaria	Germany	Luxembourg	Slovenia
Cyprus	Greece	Malta	Spain
Czech Republic	Hungary	The Netherlands	Sweden
Denmark	Iceland	Norway	Switzerland
Ireland	Italy	Poland	United Kingdom
Estonia	Latvia	Portugal	

Please note: All applicants for the speech and language therapist Part of the Register for whom English is not their first language must provide required language proficiency test result (see guidance notes). This requirement extends to citizens of relevant European states.

Section 8 Career history

Please provide a summary of your career history. Please provide this in reverse chronological order with most recent post first.

Employer's name	
Your job title in English	
Your job title in its original language (if applicable)	
Address	
Town / city	
County / state	
Postcode / zipcode	
Country	

Contact name (eg supervisor)	
Job title of contact	
Work telephone number	

Employment start date (DD/MM/YYYY)	□□	□□	□□	□□	□□	□□
Employment end date (DD/MM/YYYY)	□□	□□	□□	□□	□□	□□

(leave blank if you are still in this employment)

Please complete the sections below:

That profession / occupation was subject to regulation by the following regulatory body

Name of regulatory body	
Address	
Telephone number	
Email	
Website address	
Your registration number (or equivalent)	

Career history (continued)

Employer's name

Your job title in English

Your job title in its original language (if applicable)

Address

Town / city

County / state

Postcode / zipcode

Country

Contact name (eg supervisor)

Job title of contact

Work telephone number

Employment start date (DD/MM/YYYY)

Employment end date (DD/MM/YYYY)

(leave blank if you are still in this employment)

Please complete the sections below:

That profession / occupation was subject to regulation by the following regulatory body

Name of regulatory body

Address

Telephone number

Email

Website address

Your registration number (or equivalent)

Career history (continued)

Employer's name

Your job title in English

Your job title in its original language (if applicable)

Address

Town / city

County / state

Postcode / zipcode

Country

Contact name (eg supervisor)

Job title of contact

Work telephone number

Employment start date (DD/MM/YYYY)

Employment end date (DD/MM/YYYY)

(leave blank if you are still in this employment)

Please complete the sections below:

That profession / occupation was subject to regulation by the following regulatory body

Name of regulatory body

Address

Telephone number

Email

Website address

Your registration number (or equivalent)

In the space below, please tell us about your main duties and responsibilities.

A series of horizontal dotted lines provided for the respondent to write their answer.

Section 9 Professional reference

Referee’s guidance on completing the professional reference form

You have been asked to complete a professional reference by the person who has given you this form because they want to be registered with the Health and Care Professions Council (HCPC).

You can complete this reference only if you are or have been responsible for managing or supervising the applicant's professional practice or professional training (eg student internship).

Please provide as much detail as possible and continue on extra sheets of paper if you need to.

The professional reference may be used by the HCPC to verify whether the applicant is a safe and effective professional. A professional reference is to be provided on this form by a person who is or has been responsible for managing or supervising the applicant’s professional practice or student internship.

The HCPC may make further enquiries of the applicant or the referee in order to verify or clarify any part of this reference.

Professional reference form 1

This section is to be completed by the applicant.

Applicant details

Your title Mr Mrs Miss Ms other (please specify)

Your first name

Your surname / family name

Previous name(s)

Job title / position in English

Job title / position in its original language (if applicable)

Work details (work place / placement to which this reference is relating)

Employer’s name

Address

Town / city

County / state

Postcode / zipcode

Country

Work telephone number

Email

Please use the space below to tell us any additional information. Please use extra sheets if necessary.

.....

.....

.....

.....

The rest of this form should be completed in full by the referee.

Your title Mr Mrs Miss Ms other (please specify)

Your first name

Your surname / family name

Previous name(s)

Job title / position

Work address (current)

Street name

Town / city

County / state

Postcode / zipcode

Country

Telephone number

Mobile number

Email address

Please use the following section to tell us about the applicant.

Qualifications

.....

.....

.....

.....

In what capacity is the applicant known to you (eg employee, student, volunteer)?

.....

.....

.....

How long have you known the applicant?

years months

Dates when you supervised the applicant

Start date (DD/MM/YYYY)

End date (DD/MM/YYYY)

Full-time hours per week

Part-time hours per week

Please describe the work setting(s) and give an indication of the range of patients, clients or users and the type of conditions treated.

.....
.....
.....

Please tell us about the types of assessment, treatment and evaluation methods that the applicant used during their time under your supervision.

.....
.....
.....
.....
.....

The HCPC may make further enquiries in respect of the applicant and you, as referee, to verify or clarify information about the applicant and your reference. Should any of the information you have supplied in this reference not be accurate or if you have made any false claims, you may be committing a crime.

The HCPC processes your personal data as disclosed in this reference for the purpose of administering the application to which it is attached. The HCPC may contact you to ensure that your reference is accurate and may also disclose your personal data to third parties to check its accuracy. Should any inaccuracies be established, your personal data may be transferred to a third party for further investigation. Should a registrant transfer to another country, your reference may be passed to any appropriate regulators in that country.

By signing this reference you confirm that the information that you have provided is accurate and that your personal data may be processed for the purposes specified above.

Date (DD/MM/YYYY)

Signed

Print name

Section 9 Professional reference (continued)

Referee's guidance on completing the professional reference form

You have been asked to complete a professional reference by the person who has given you this form because they want to be registered with the Health and Care Professions Council (HCPC).

You can complete this reference only if you are or have been responsible for managing or supervising the applicant's professional practice or professional training (ie student internship).

Please provide as much detail as possible and continue on extra sheets of paper if you need to.

The professional reference may be used by the HCPC to verify whether the applicant is a safe and effective professional. A professional reference is to be provided on this form by a person who is or has been responsible for managing or supervising the applicant's professional practice or student internship.

The HCPC may make further enquiries of the applicant or the referee in order to verify or clarify any part of this reference.

Professional reference form 2

This section is to be completed by the applicant.

Applicant details

Your title Mr Mrs Miss Ms other (please specify)

Your first name

Your surname / family name

Previous name(s)

Job title / position in English

Job title / position in its original language (if applicable)

Work details (work place / placement to which this reference is relating)

Employer's name

Address

Town / city

County / state

Postcode / zipcode

Country

Work telephone number

Email

Please use the space below to tell us any additional information. Please use extra sheets if necessary.

.....

.....

.....

.....

The rest of this form should be completed in full by the referee.

Your title Mr Mrs Miss Ms other (please specify)

Your first name

Your surname / family name

Previous name(s)

Job title / position

Work address (current)

Street name

Town / city

County / state

Postcode / zipcode

Country

Telephone number

Mobile number

Email address

Please use the following section to tell us about the applicant.

Qualifications

.....

.....

.....

.....

In what capacity is the applicant known to you (eg employee, student, volunteer)?

.....

.....

.....

Section 10 Paying your scrutiny fee

Payment for this application only – include only the scrutiny fee for this application (payment for multiple applications unfortunately cannot be accepted and may result in the applications being returned to you).

I wish to pay by (please cross appropriate box)

- Cheque (payable to **Health and Care Professions Council**)
- British postal order
- Money order
- Bankers draft
- Debit card
- Credit card

Amount **£ 420.00**

If you have chosen to pay by debit or credit card please complete the section below

Cardholder's signature
Date (DD/MM/YYYY)

HCPC USE ONLY

Advisor taking payment

Date taken (DD/MM/YYYY)

Authorisation code

Application number **A A**

Cardholder's name

Card number

Valid from (MM/YY) Expires on (MM/YY)

Security code (the last 3 digits of the number on the signature strip - see diagram below)



Issue number (if applicable)

Section 11 Declaration of information

- **I declare** that my physical and mental health do not impair my fitness to practise the profession to which my application relates.
- **I declare** that I have read, understood and will comply with the HCPC's standards of conduct, performance and ethics.
- **I have** read the data protection information statement set out in the notes which accompany this application form and understand that the HCPC may process all of my personal data, as defined by the Data Protection Act 1998, for the purposes set out in that statement. I understand that my consent is not required for the HCPC to undertake the processing required by the Health and Social Work Professions Order 2001.
- **I consent** to the HCPC processing my personal data for the purposes set out in the information statement which are not required by the Health and Social Work Professions Order 2001. I understand that I may withdraw my consent to the HCPC processing my personal data for any marketing purposes by writing to the HCPC informing it that I am withdrawing that consent.
- **I understand** that fraudulently procuring an entry in the HCPC Register is a criminal offence under article 39 of the Health and Social Work Professions Order 2001.
- **I declare** that I have read, understood and will comply with the HCPC's requirements for continuing professional development (CPD).
- **I agree** to pay the fees for my registration using the option chosen by me in section 10.
- **I consent** to the HCPC contacting any person to gather further information on my application or to confirm the information that I have provided. I consent to any person approached by the HCPC to assist with the evaluation of my application providing the HCPC with any information held by that person in respect of me that the HCPC may request.

Date (DD/MM/YYYY)

Signature

Print name

Section 12 Character reference

Please give this section to the person you ask to complete your character reference form.

Referee's guidance on completing the character reference

Before being registered under the Health and Social Work Professions Order 2001 an applicant must satisfy the HCPC that they are of good character.

You have been asked to complete a character reference by the person who has given you this form (the applicant), because they want to be registered with the Health and Care Professions Council (HCPC).

A character reference needs to be provided by a person of standing in the community who is not a relative of the applicant and has known the applicant for at least three years. A professional person (eg a registered professional, a solicitor, barrister or other legal practitioner or an accountant) will be recognised as a person of standing in the community as will a:

- bank manager or officer;
- judge, magistrate or other judicial official;
- minister of the Church, Rabbi, Imam or other recognised religious official;
- member of a parliament or other legislative body;
- serving officer in HM Armed Forces; or
- a teacher / lecturer.

This is not an exhaustive list and if you have any questions as to whether you are able to provide a character reference please contact us on +44 (0)845 300 4472 or +44 (0)20 7582 5460.

Once completed please return the character reference directly to the applicant.

Character reference continued

This form is to be completed by your character referee

Before being registered under the Health and Social Work Professions Order 2001 an applicant must satisfy the HCPC that they are of good character. A character reference must be provided on this form by a person of standing in the community who is not a relative of the applicant and who has known the applicant for at least three years. For a list of acceptable referees, please refer to the guidance notes for international applicants.

Please return this form to the applicant once complete.

Applicant details

Name	<input type="text"/>
Address	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
Profession in English	<input type="text"/>
Profession in its original language (if applicable)	<input type="text"/>

Referee details

Name	<input type="text"/>
Occupation	<input type="text"/>

If you are a member of a professional or regulatory body, please provide its name and your membership / registration number

<input type="text"/>
<input type="text"/>

Practice or business address	<input type="text"/>
<input type="text"/>	<input type="text"/>

Telephone	<input type="text"/>
-----------	----------------------

Email address	<input type="text"/>
---------------	----------------------

Please state capacity in which you know the applicant (do not leave blank)	<input type="text"/>
<input type="text"/>	<input type="text"/>

I confirm that I have known the applicant for **at least three years** and know of no reason why they should not practise the above profession with honesty and integrity.

The HCPC may make further enquiries in respect of the applicant and you, as referee, to verify or clarify information about the applicant and your reference. Should any of the information you have supplied in this reference not be accurate or if you have made any false claims, you may be committing a crime.

The HCPC processes your personal data as disclosed in this reference for the purpose of administering the application to which it is attached. The HCPC may contact you to ensure that your reference is accurate and may also disclose your personal data to third parties to check its accuracy, including but not limited to checking that you are a member of a professional body. Should any inaccuracies be established, your personal data may be transferred to a third party for further investigation. Should a registrant transfer to another country, your reference may be passed to any appropriate regulators in that country.

By signing this reference you confirm that the information that you have provided is accurate and that your personal data may be processed for the purposes specified above.

Date (DD/MM/YYYY)	<input type="text"/>	<input type="text"/>	<input type="text"/>	Signature
-------------------	----------------------	----------------------	----------------------	-----------------

Section 13 Background check consent form

Applicant details

Name

Profession

Notes for applicants

Rule 5(1) of the Health and Care Professions Council (Registration and Fees) Rules 2010 authorises the HCPC to seek additional information about a registration applicant from any person or source it considers appropriate, for the purpose of satisfying itself as to the good character of that applicant.

As your application may be subject to such further backgrounds checks, please provide the information and consent requested below and include this Consent Form with your application.

Consent to background checks

In making my application for HCPC registration:

1. I understand that, in order to verify the accuracy of the information I have provided, the HCPC may undertake further background checks including verifying the information I have given, conducting background enquiries and asking for, and checking my employment, qualifications and personal, academic and employer references.
2. I agree that:
 - (1) the HCPC may undertake such background checks as it considers appropriate for the purpose of establishing that I am of good character;
 - (2) the HCPC has appointed Kroll Background Worldwide Limited (Kroll) as its agent to carry out the checks on its behalf and may appoint such other agents as it sees fit to carry out such checks;
 - (3) the recipient of any inquiries made as part of such checks may release information about me which they hold and which is relevant to a request for information made by or on behalf of the HCPC;
 - (4) my personal data may be given to:
 - my referees and any other persons or bodies identified in my application;
 - regulatory bodies, law enforcement agencies and prosecuting authorities, both in the UK and in other jurisdictions; and
 - such other third parties as the HCPC considers appropriate;

and that, for the purpose of conducting background checks, the HCPC, Kroll and any other agent appointed by the HCPC may transfer my personal data outside of the European Economic Area to be processed and stored in any appropriate format. I also agree that such data may be passed to Kroll Group Companies, both within and outside the EEA, for the purpose of conducting such background checks.

3. I confirm that the information I have provided in my application is true and accurate and understand that, if I have made a false declaration or provided any false information or documents in support of my application, the HCPC may withhold my registration and I may be liable to prosecution under Article 39 of the Health and Social Work Professions Order 2001.

Signature Date (DD/MM/YYYY)

Print Name

Please sign your signature so that it matches the signature on your passport or identity card. If your first language is not composed of characters from the Latin alphabet (ABC etc), please also provide your usual signature and name using characters from your first language in the boxes below:

Signature

Print name

✉ Registration Department
184 Kennington Park Road, London, SE11 4BU

☎ +44 (0)845 300 4472 or +44 (0)20 7582 5460

🌐 www.hcpc-uk.org

✉ registration@hcpc-uk.org



These guidance notes are intended to help you complete the application form. They will also help you understand the application process. However, if after reading the guidance notes there is something you do not understand please contact us.

Introduction

- About the Health and Care Professions Council (HCPC)
- How we are run
- About registration
- Applying for registration
- Meeting our standards
- Protected titles

About this guidance

- Applying through the international registration process
- General information on completing the forms
- Sending us your application
- What happens next?
- Contact us
- Certified documents
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- Successful applications
- Providing further verification
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- Test of competence
- Rejected applications
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- How to keep your name on the Register
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About the HCPC

We are the Health and Care Professions Council. We are a regulator of health and care professionals and our job is to protect the health and wellbeing of people who use the services of the health and care professionals registered with us.

To protect the public, we set standards that health and care professionals must meet. Our standards cover health and care professionals' education and training, behaviour and professional skills. We publish a Register of health and care professionals who meet our standards.

We currently regulate 16 professions.

- Arts therapists
- Biomedical scientists
- Chiropodists / podiatrists
- Clinical scientists
- Dietitians
- Hearing aid dispensers
- Occupational therapists
- Operating department practitioners
- Orthoptists
- Paramedics
- Physiotherapists
- Practitioner psychologists
- Prosthetists / orthotists
- Radiographers
- Social workers (in England)
- Speech and language therapists

How we are run

We were created by legislation called the Health and Social Work Professions Order 2001. This lays out our responsibilities and it gives us our legal authority to carry these out. We have a Council which is made up of registered health and care professionals and members of the public. This Council sets our strategy and policy and makes sure we are fulfilling our duties under the Health and Social Work Professions Order.

About registration

Health and care professionals must register with us in order to use the protected title for their profession. This means that even if you have completed a course in, for example, physiotherapy, you are still not able to call yourself a physiotherapist unless you are registered with us.

Registration shows you meet our standards for your profession. Registration shows the public that health and care professionals are fit to practise and they are entitled to use the protected title(s) for their profession. It shows the people on our Register are part of a profession with nationally recognised standards set by law.

When we say someone is 'fit to practise', we mean they have the skills, knowledge and character and health to do their job safely and effectively.

Applying for registration

The information provided by applicants helps us to know that:

- they are who they say they are;
- they meet our standards; and
- we can contact them if we need to.

Meeting our standards

Everyone on our Register must meet the standards of proficiency we have set. The standards of proficiency are the professional standards which health and care professionals must meet in order to be registered. If you need a copy in an alternative format, please contact us. Our contact details can be found at the front of this form. The standards of proficiency are made up of generic standards, which all registered health and care professionals must be able to meet, and profession-specific standards, which apply to each profession.

Protected titles

Each of the professions we regulate has at least one protected title. Anyone who uses one of these titles must be on our Register. Anyone who uses a protected title who is not registered with us is breaking the law and could be prosecuted.

Part of Register	Title
Arts therapists: Art, Drama or Music	Art psychotherapist Art therapist Drama therapist Music therapist
Biomedical scientists	Biomedical scientist
Chiropodists / podiatrists	Chiropodist Podiatrist
Clinical scientists	Clinical scientist
Dietitians	Dietitian Dietician
Hearing aid dispensers	Hearing aid dispenser
Occupational therapists	Occupational therapist
Operating department practitioners	Operating department practitioner
Orthoptists	Orthoptist
Paramedics	Paramedic
Physiotherapists	Physiotherapist Physical therapist
Practitioner psychologists	Clinical psychologist Counselling psychologist Educational psychologist Forensic psychologist Health psychologist Occupational psychologist Practitioner psychologist Registered psychologist Sport and exercise psychologist
Prosthetist / orthotist	Prosthetist / orthotist Prosthetist Orthotist
Radiographers: diagnostic or therapeutic	Radiographer Diagnostic radiographer Therapeutic radiographer
Social workers	Social worker
Speech and language therapists	Speech and language therapist Speech therapist

Applying through the international application process

The international application form is for those who have gained a qualification outside of the United Kingdom (UK) and / or do not hold an approved UK qualification but have gained some or all of their professional experience outside the UK.

General information on completing the forms

To make sure we can process your form, please complete it in black ink and block capitals. Please mark boxes with a cross. If you run out of space please continue on a separate piece of paper. You must answer all the questions as fully as possible.

Please do not send us original documents unless otherwise specified.

Sending us your application

Please send your application when you are ready to start practising your profession and / or using the protected title(s).

Important points

- Please ensure the address you provide is accurate and that you can be sure to receive correspondence from us.
- We cannot guarantee the outcome of an application, so you are advised not to make arrangements that are reliant on you being registered (eg starting a job).
- Applicants that choose to make travel or work arrangements before knowing the outcome of their application do so at their own risk.
- It is preferable to apply directly to HCPC. However, if you apply with the assistance of an agency make sure they are reputable and be aware that you remain responsible for the information you supply on your application form.

What happens next?

The average processing time for applications may vary depending on the volume of applications received. However, HCPC will endeavour to:

- acknowledge receipt of an application within one month of the date of receipt; and
- assess your application and advise you of the initial decision within a further three months from the date of acknowledgment.

If your application is approved, we will contact you to ask you to pay a registration fee. Once this fee has been received and processed, you will be allocated a registration number and your name will appear on the HCPC online Register. The online Register is available to view on our website at www.hcpc-uk.org. This is the best way for you to check you are registered and for your employer to verify your registration status.

Contact us

If you cannot find the answer to your query in these guidance notes please contact us. Please see page one for our contact details.

Certified documents

In the section below, we explain what documents you must send with your application to verify your identity. These documents **must be certified** as a true copy of the original by a person of professional standing in the community. This means that the person you ask to certify your document(s) must write on it 'I **certify** that this is a true copy of the original document' and must sign it and print their name and professional title. A professional person (eg a registered professional, a solicitor, barrister or other legal practitioner or an accountant) will be recognised as a person of standing in the community as will a:

- a bank manager;
- a Justice of the Peace or other judicial official;
- a minister of the Church, Rabbi, Imam or other religious official acceptable to the Council;
- a Member of Parliament, Member of Scottish Parliament, Member of the Northern Ireland Assembly, Member of the Welsh Assembly;
- an Officer in HM Armed Forces;
- a teacher / lecturer; or
- a registered health and care professional.

This is not an exhaustive list and if you have any questions as to whether a person is considered to be a person of professional standing in the community please contact us.

Verifying your identity

We ask all applicants to provide us with a legible **certified** photocopy of:

- a document containing your photograph; **and**
- a document proving your current address.

Documents you may consider sending us include:

- current signed full passport;
- national identification card and / or other valid documentation relating to immigration status and permission to work in the UK;
- current valid driving licence;
- current benefit book or card or original notification letter from the appropriate government department;
- marriage or civil partnership certificate;
- divorce order or dissolution order;
- confirmation from an Electoral Register*;
- recent utility bill*;
- local authority tax bill (valid for the current year);
- bank, building society or credit union statement or passbook containing current address*;
- recent mortgage statement from a recognised lender*;
- current local council rent card or tenancy agreement.

* If these documents are submitted, the date should be within the last six months. If you are sending a bank or building society or credit union statement please black out the account number and sort code details.

The Health and Care Professions Council (Registration and Fees) Rules 2010 authorises the HCPC to seek additional information about a registration applicant from any person or source it considers appropriate, for the purpose of satisfying itself as to the good character of that applicant. As your application may be subject to such further background checks, please complete and return the background check consent form in section 13 of the application pack.

If you cannot provide photographic documentation

If you are unable to provide photographic documentation, you should provide us with a passport sized photograph of yourself. This should be endorsed on the back with the signature of a person of standing in the community who has known you for at least three years. The photograph should be accompanied by a signed statement from that person, indicating the period of time that you have been known to them. They should also provide us with their contact details.

Translation of documents

If you submit documents that are not in English, you must also provide us with certified English translations. If you are applying from abroad, the British Embassy, Consulate or High Commission may be able to help you find a translator. In the UK, your own Embassy, Consulate or High Commission may be able to help.

Please note:

- All completed application forms are the property of HCPC and should be returned to us. Please do not send us documents which you would like to be returned to you.
- Please read the checklist carefully and provide all the appropriate items / documents.
- Please make sure your contact details are kept up to date.
- All references and the declaration of information must be dated within six months of the date your application is received by HCPC.
- We will process your application and endeavour to tell you the decision as quickly as possible. Please do not make any arrangements or incur any expenses which depend upon the approval of your application with us. We will not accept liability for any loss or expenses incurred as a result of the above.
- It is illegal to use a protected title unless you are registered with us. It is illegal to claim you are registered with the HCPC when you are not.

Application process overview

All applications are checked in HCPC's offices for completeness; once they are deemed to be complete they are ready to be assessed by registration assessors (members of the relevant profession).

The assessment is based on the standards of proficiency for each profession.

The assessors pass their recommendations to the Education and Training Committee who make the decision on your application.

The HCPC also conducts verification checks to confirm an applicant's professional experience, education and training.

Two types of international applications: EEA and International

Applicants who are citizens of, and fully qualified to practise in, another relevant European State may have **mutual recognition rights** under EU Directive 2005/36/EU.

The relevant European states are the members of the European Union (EU), European Economic Area (EEA) and Switzerland:

Austria, Belgium, Bulgaria, Cyprus, Czech Republic, Denmark, Éire (Republic of Ireland), Estonia, Finland, France, Germany, Greece, Hungary, Italy, Latvia, Lithuania, Luxembourg, Malta, the Netherlands, Poland, Portugal, Romania, Slovakia, Slovenia, Spain, Sweden, United Kingdom, Iceland, Liechtenstein, Norway and Switzerland.

To assert your mutual recognition rights you must show that you are a citizen of another relevant European State (by providing a **certified** copy of your passport or other relevant documentation) and establish that you are fully qualified to practise in another relevant European State (for example, by providing the proof of legal establishment to practice in another European State).

We refer to those exercising mutual recognition rights as '**EEA applicants**'.

We refer to those who do not hold mutual recognition rights as '**International applicants**'.

Outcomes of an application

Incomplete applications

If your application is incomplete we will return it and ask you to resubmit it. Please do not send individual documents separate from your application as these will be returned to you. We will use the information you provide for a number of purposes. This can include contacting organisations and individuals named in your application, including professional bodies, universities, places of work and referees.

Successful applications

If your application is successful, we will:

- put your name on the Register subject to payment of your registration fee;
- send you a letter on the day we register you; and
- send you a registration certificate and authentication card.

With your name on our Register you will be able to practise using the relevant title(s) of your profession.

The publicly available Register shows:

- name;
- registration number;
- profession of registrant;
- duration of current registration;
- approximate geographical area in which the registrant practises (eg Guildford - not full address);
- registration status; and
- annotation (if applicable).

Providing further verification

If a decision cannot be made based on your application, you may be asked to provide further verification to support your application for registration.

International applicants

Test of competence

If a decision cannot be made based on your application, you may be asked to undertake a test of competence. A test of competence may cover any of the following for the purposes of determining whether you are proficient in relation to:

- knowledge and understanding of the nature and ethical basis of your profession;
- understanding the key concepts of the bodies of knowledge relevant to your profession;
- assessment, before and during the provision of professional services* and the preparation of case histories or exemplars;
- the selection of appropriate professional services*;
- the delivery of professional services*, the evaluation of the response to them and their effectiveness;
- giving advice concerning any professional services*;
- communication with service users, other professionals and other service providers, which may include assessment of the need for referrals or second opinions; and
- record keeping.

*For this purpose 'professional services' means any treatment, therapy, consultation, intervention or other provision of services.

A test of competence may be conducted as an oral or written test (or both) and may include a test requiring a practical demonstration. A test of competence will be conducted by assessors who will be registered practitioners from the same part of the Register.

Rejected applications

Your application may be rejected if we believe you do not meet our standards of proficiency or our health and character requirements. Please note your application can only be assessed based on the information you provide with your form. If your application is rejected you can appeal against the decision. You may also reapply, submitting a new form, supporting documents and registration fee.

Your right of appeal against the final decision to reject your application arises if you believe that:

- the decision to reject your application is wrong; and
- you meet the standards of proficiency; and
- you meet the HCPC's character and health requirements.

You will need to establish the grounds for your appeal (ie why you believe that the decision taken is wrong) and follow the appeals procedure.

EEA applicants

Adaptation period and aptitude test

Those applicants with mutual recognition rights may be asked to undergo an adaptation period in case they do not meet all the standards of proficiency relevant to their profession at the point of application. They may also choose to take an aptitude test in place of their recommended adaptation period.

Fraudulent applications

If you falsify information about your identity or any other aspect of your application, the HCPC will suspend your application pending an investigation. If such information becomes known to us after you have been registered, an investigation will be launched and your registration may be suspended or terminated. It is a criminal offence to fraudulently obtain registration with the HCPC. You may be committing a criminal offence if you supply false information and you may be prosecuted.

The appeals process

If your application is refused, rejected or you are asked to undergo an adaptation period you have 28 days following the date of the letter rejecting your application to write to us to appeal against the decision. We will then provide you with further information on the appeals process.

Section 1 Registration details

Previous applications

If you have previously applied for registration with us or our predecessors the Council for Professions Supplementary to Medicine (CPSM) or the Health Professions Council (HPC), please tell us your application number.

Section 2 Contact details

It is essential that your personal contact details are kept up to date. This is a requirement of the Health and Social Work Professions Order 2001. For security reasons we are unable to accept changes of personal details by email.

Name change

All name changes must be made in writing. Please also send us a **certified** photocopy of the relevant document (eg marriage certificate).

Home address

We ask you to give us your main home address. This address is not published on the publicly available Register, but is required by us for all HCPC correspondence. You can change your address over the telephone or by writing to us.

Work address

The work address you give us should be for your main place of work if it is relevant to your profession. Members of the public will be able to see on our Register the approximate geographical area in which you practise. If you are not currently practising you can leave this section blank and contact us as soon as you are able to give us a work address. You can change your address over the telephone or by writing to us.

If you change either your home or work address during the application process or at any point thereafter, you must notify us.

Agencies

All correspondence from HCPC will be sent to the applicant only. This means you must provide a home address and not the address of an agency. Please be aware if you provide an agency address your application will be returned to you.

Section 3 Regulatory body membership

If your profession is regulated in the jurisdiction where you currently live or work you should enter the details of your registration here. A distinction should be made between a regulatory body and a professional body. You can enter details of membership of any professional body in Section 4.

Section 3 should be used to inform us of any registration you may currently (or most recently) have with a regulatory body. Please tell us the title under which you are registered in the original language. If you have been registered with a number of regulatory bodies in the past please complete the details in Section 8 (career history) of the application form relating to each position you have held.

If your profession is not currently regulated in your home jurisdiction it will not affect your application. Your application will be assessed on whether or not you meet our standards of proficiency. Similarly, if you are registered with another regulatory body their standards may be different from ours and therefore it does not guarantee that you will be accepted for registration with HCPC. You must still demonstrate that you meet the HCPC standards of proficiency.

Applicants exercising mutual recognition rights should provide a certified attestation of legal establishment to practice in another EEA state.

Section 4 Professional body membership

If you are a member of any professional body please enter the details in Section 4 of the application form.

Section 5 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 character raises concerns about their ability to practise safely and effectively.

When making decisions about character, we look at whether someone is of 'good character' or whether there is any evidence of past actions which might suggest that the person is not of 'good character'. Evidence that someone might not be of 'good character' could include evidence of untrustworthiness, dishonesty, actions which harmed a service user or a member of the public or actions which might affect the public's confidence in the registered professions.

When we talk about 'health' we mean health conditions which may affect an applicant's fitness to practise. We are not asking whether an applicant is 'healthy'. This is because someone may be unwell or may have a health condition which they manage appropriately but they may still be able to practise their profession safely. We do not need information about any health condition unless it affects your fitness to practise. We recognise that a disability may not be seen as a health condition. So, we only need information about a disability or health condition if it affects your fitness to practise.

Having a disability should not be seen as a barrier to becoming a health and care professional. We have produced guidance for disabled applicants called A disabled person's guide to becoming a health and care professional which you should refer to for more information on this issue.

If you answer 'yes' to any of the questions in this section, please read our brochure Guidance on health and character which can be found on our website at www.hcpc-uk.org/publications

Character

The professions regulated by the HCPC are exempt from the Rehabilitation of Offenders Act. This means we do not consider any conviction to be spent. It is important that you declare to us any convictions, police cautions or convictions for which you have received a conditional discharge. Failure to do so may result in an investigation which could lead to you being removed from the Register.

Health

You are also asked to provide us with information about your health that may affect your practice, this does not necessarily mean we will not register you. Instead, we will consider the information provided to decide whether we need to ask a registration panel to consider your application.

Vetting and Barring

Vetting and barring schemes are being introduced across the United Kingdom (UK) for those who work (whether paid or in a voluntary activity) with children and vulnerable adults. Whether you need to be registered will depend upon the nature and extent of your contact with children or vulnerable adults but, as the activities covered by the schemes include the delivery of health and social care, it is expected that the majority of HCPC registrants will need to be registered in due course.

A separate scheme will apply in Scotland from that which applies in the rest of the UK, but a barring decision made under either scheme (preventing a person from working with children and / or vulnerable adults) will apply throughout the UK. If you work both in Scotland and another part of the UK you may need to be registered under both schemes.

Both schemes are being gradually phased in over a period of years. We cannot advise you whether you need to be registered in either scheme. In order to determine if and when you need to be registered, please contact the following:

For England, Northern Ireland and Wales:

Tel: +44 (0)300 123 1111

Website: www.crb.homeoffice.gov.uk/faqs/vetting_and_barring_scheme.aspx

For Scotland:

Vulnerable Groups Scheme Implementation Team

Children, Young People and Social Care Directorate

Scottish Government

Victoria Quay

Edinburgh EH6 6QQ

Tel: +44 (0)131 244 7612

Email: pvg.enquiries@scotland.gsi.gov.uk

If you are registered under either scheme (or both) for any reason, even if it is unconnected with your professional activities (for example, because of volunteer work), you need to provide us with your registration number(s).

If you are subject to a barring decision under either scheme you need to disclose this and provide us with the details of that decision.

If you declare a health and / or character or vetting or barring issue this could be considered by a panel to determine whether you are eligible for registration.

Section 6 Education and training

You should enter details of your professional qualification here. Your professional qualification may be a diploma, certificate, degree or another qualification relevant to the profession in which you wish to register. You can also include any supplementary training or qualification you may have done in relation to your chosen profession (eg training courses, seminars). However, we do not usually need details of your general education (eg high school or secondary school) unless it is directly relevant to your practice as a health and care professional.

If you have gained further qualifications in your chosen professional field you can enter the details in the space provided and continue on a separate sheet if necessary.

Course information

You must include a course information form with your application. Failure to do so will result in your application being returned to you. The course information form provides us with details of the theoretical and practical content of the courses you have successfully undertaken. The course information form is not in your application pack, but is available on the HCPC website as a Microsoft Word file. The form must be downloaded and sent to your training institution or university as an email attachment.

Alternatively direct them to the HCPC website: www.hcpc-uk.org/apply/app_download_international

The training institution or university can type the information into the field boxes - which can be expanded according to the text that is entered.

The information provided should include the scope of the course content and the method by which the assessment was made. They are advised to use the profession specific standards of proficiency as a guide. This information may be taken from a syllabus, but must only include those parts of the course you have studied. In addition, we ask that you specify the percentage of practical assessment that contributed to the overall course. You must provide a breakdown of the number of theoretical and practical hours by module. This information is likely to be several pages long.

If sufficient detail is provided, the training institution or university may wish to retain the form as a template for future use when applicants with the same course background apply in the future.

Please ensure that the form is stamped with the training institution or university's official seal before they send it back to you.

Please provide contact details for course administrator / leader. This will help us conduct necessary verification checks.

Section 7 Language proficiency

Each registrant must be confident that they can communicate effectively in English in order to meet our standards of proficiency unless you are exempt because you are a citizen of a relevant European State.

You must declare whether English is your first language or not. You should only indicate English is your first language if it is the **main** or **only** language you use on a day-to-day basis.

Having studied English or undertaken education or training at an institution where the medium of instruction is English does not necessarily mean that English is your first language. If English is not your first language then you must provide proof of your English language proficiency, unless you are exempt as explained below.

Applicants whose first language is not English and who are required to provide a language test certificate as evidence of their proficiency must ensure that it is, or is comparable to, IELTS level 7.0 with no element below 6.5. If you propose to rely upon a non-IELTS test score, you are strongly advised to contact us before you make your application in order to ensure the test is comparable and meets our standards of proficiency. Failure to do so may delay the processing of your application.

Please note that the standard of proficiency for speech and language therapists is IELTS level 8.0 with no element below 7.5. This requirement applies to all applicants regardless of their nationality.

Exemption from language proficiency test

If you are a citizen of a relevant European State you are exempt from providing proof of English language proficiency, unless you are applying for registration as a **speech and language therapist**. However, if you are admitted to the register, you must meet the standards of proficiency for your profession, which include a requirement to be able to communicate in English to an appropriate level.

Citizenship of relevant European State

To be exempt from providing proof of English language competence you must provide evidence that you are a citizen of a relevant European State. This will usually be a **certified** copy of your passport or a **certified** copy of your national identity card.

Relevant European Status

The relevant European States are:

Austria, Belgium, Bulgaria, Cyprus, Czech Republic, Denmark, Éire (Republic of Ireland), Estonia, Finland, France, Germany, Greece, Hungary, Italy, Latvia, Lithuania, Luxembourg, Malta, the Netherlands, Poland, Portugal, Romania, Slovakia, Slovenia, Spain, Sweden, United Kingdom, Iceland, Liechtenstein, Norway and Switzerland.

Dual nationality

If you hold dual nationality status and one or more of those nationalities are of a relevant European State then you are also exempt from providing proof of your English language proficiency.

Section 8 Career history

If you have experience in addition to your training and qualifications, please enter details of your career history in reverse order, with your most recent position first. Provide as much detail as you can to illustrate to the assessors that you meet the standards of proficiency for your profession. Explain any significant gaps in your career history on additional sheet of paper.

Section 9 Professional reference(s)

You must provide us with **at least one professional reference** in order for us to assess your application'.

The professional reference should be given by someone who has been your supervisor / line manager or otherwise responsible for you in a professional capacity. We cannot consider a reference provided by someone who is related to you by birth, marriage or a relationship similar to marriage.

We will consider all forms of reference, whether a simple statement about your time in practice or a more detailed statement about the nature of your practice. You must use the professional reference form(s) and additional sheets as necessary.

We ask you to complete the first section of the professional reference form before you send the form to your referee.

Important points

- The professional reference must be completed on a HCPC professional reference form.
- References should be signed no more than six months before the submission of your application.
- Referees may charge a fee for completing your professional reference form. Any costs incurred will have to be met by you.
- Referees must confirm their occupation practice or business address. All references must be completed by the referee, returned to you in a sealed envelope and forwarded with your application form to us. They must have the original signature of the referee. We cannot accept faxed, photocopied or emailed copies of reference forms.
- We cannot accept references sent directly to us by your referee.
- Please remember that if you provide fraudulent references you may be prosecuted.

After you have obtained your professional reference

When your referee has completed your professional reference, it should be returned to you. Keep this with your character reference and send to us with the rest of your application.

Section 10 Paying your fee

Scrutiny fee

The fee we ask you to send with your application is called a scrutiny fee. This is a one off non-refundable payment of £420. We cannot process your application without this payment.

Registration cycle

Your registration cycle is biennial (two-yearly) and is made up of two 'professional years'. We will advise you of the registration fee when your application has been processed and approved. The table below shows the professional years for each profession we regulate.

Arts therapists	1 June – 31 May
Biomedical scientists	1 December – 30 November
Chiropodists / podiatrists	1 August – 31 July
Clinical scientists	1 October – 30 September
Dietitians	1 July – 30 June
Hearing aid dispensers	1 August – 31 July

Occupational therapists	1 November – 31 October
Operating department practitioners	1 December – 30 November
Orthoptists	1 September – 31 August
Paramedics	1 September – 31 August
Physiotherapists	1 May – 30 April
Practitioner psychologists	1 June – 31 May
Prosthetists / orthotists	1 October – 30 September
Radiographers	1 March – 28 February
Social workers (in England)	1 December – 30 November
Speech and language therapists	1 October – 30 September

Methods of payment

You can choose to pay your scrutiny fee by cheque, money order, bankers draft or by credit / debit card. Payments must be made in UK sterling and drawn on a bank based in the UK. Your payment should be crossed and made payable to Health and Care Professions Council. Please write your full name on the reverse side of your payment and ensure that it is not post-dated. You should allow at least five working days for your payment to reach us (ten if sending from outside the UK).

Section 11 Declaration of information

HCPC can only process your application if you have signed this declaration. You should make sure that you fully understand the declaration before signing it. It is illegal to fraudulently procure an entry onto the HCPC Register. If you do this, you will be subject to prosecution.

Section 12 Character reference

Before being registered under the Health and Social Work Professions Order 2001 an applicant must satisfy the HCPC that they are of good character.

A character reference needs to be provided by a person of standing in the community who is not a relative of the applicant and has known the applicant for at least three years. This means that your referee must have a reputation in the community. A professional person (eg a registered professional, a solicitor, barrister or other legal practitioner or an accountant) will be recognised as a person of standing in the community as will:

- a bank manager;
- a Justice of the Peace or other judicial official;
- a minister of the Church, Rabbi, Imam or other religious official acceptable to the Council;
- a Member of Parliament, Member of Scottish Parliament, Member of the Northern Ireland Assembly, Member of the Welsh Assembly;
- an Officer in HM Armed Forces;
- a teacher / lecturer; or
- a registered health and care professional.

This is not an exhaustive list and if you have any questions as to whether a person is considered to be a person of standing in the community please contact us.

Important points

- The character reference must be completed on a HCPC character reference form.
- References should be signed no more than six months before the submission of your application.
- Referees may charge a fee for completing your character reference form. Any costs incurred will have to be met by you.
- Referees must confirm their occupation practice or business address. All references must be completed by the referee, returned to you and forwarded with your application form to us. They must have the original signature of the referee. We cannot accept faxed, photocopied or emailed copies of reference forms.
- We cannot accept references sent directly to us by your referee.
- Please remember that if you provide fraudulent references you may be prosecuted.

After you've obtained your character reference

When your referee has completed your character reference, it should be returned to you. Keep this with your professional reference and send it in to us with the rest of your application.

Section 13 Background check consent form

All applicants must sign and return a background check consent form

Your registration will be subject to verification of background information entailing investigative reports and references from employers, academic and professional bodies. The information you provide in your application may be verified and comprehensive background enquiries may be undertaken by the HCPC and / or the HCPC's agents and their representatives. The information may be used outside of the European Economic Area if appropriate. The information you provide may be disclosed to referees, government bodies and such other third parties as may be reasonably necessary. Please note that fraudulently procuring an entry in the HCPC Register is a criminal offence under article 39 of the Health and Social Work Professions Order 2001.

Our standards

Please read the following two documents before submitting your application:

- Standards of conduct, performance and ethics
- Standards of proficiency

Copies of these documents can be found on our website at www.hcpc-uk.org or by contacting us directly. Please see page one for our contact details.

Continuing professional development

As part of your registration with us, you need to carry out continuing professional development (CPD). Every time you renew your registration, you need to sign to confirm you are undertaking CPD. From July 2008 (2012 for hearing aid dispensers, 2013 for practitioner psychologists and 2014 for social workers), whenever your profession renews its registration, a percentage of your profession will be audited to check our CPD standards are being met. To find out more about CPD, our standards and the audit process, please download from our website the brochure *Your guide to our standards for continuing professional development*.

How to keep your name on the Register

Once you have been registered, you will need to renew your registration every two years. To make sure your name stays on the Register, we must receive:

- your registration fee;
- your signed professional declaration; and
- if you are selected, your CPD audit information.

We will send you a registration renewal form around three months before your registration expires.

Refugee applications

You do not have to pay the application scrutiny fee if you have been granted refugee status or given leave to enter or remain in the United Kingdom on humanitarian protection grounds.

You will need to send us with your application a letter from the UK Border Agency that confirms you have refugee or humanitarian protection status.

You must provide us with as much information as possible with your application. If you are unable to provide all of the information needed (for example, because documents have been destroyed or you cannot obtain them), you must include a letter which explains why you cannot provide it.

Please call the Registration Department between 8am – 6pm (UK time) Monday to Friday on +44 (0)845 300 4472 or +44 (0)20 7582 5460.

For refugee allied health professionals seeking advice and information on how to find jobs, gain experience and other useful assistance, the following Department of Health (DoH) sponsored website is a useful resource: www.rose.nhs.uk

Subject information statement

The Health and Care Professions Council (HCPC) processes your personal data (as defined by the Data Protection Act 1998 (the 1998 Act)) for the following purposes:

- administering your application to register with the HCPC and any subsequent renewals;
- maintaining and publishing the health and care professions Register;
- undertaking regulatory activities for the purposes of the Health and Social Work Professions Order 2001 (as amended);
- ensuring that you comply with our standards, including but not limited to, ensuring compliance with continuing professional development and educational requirements;
- investigating complaints made about you;
- investigating complaints made by you;
- publishing the results of any complaints made about you or by you;
- transferring your personal data to any other authorised body investigating your activities;
- transferring your name, profession, registration number, registration dates and approximate location of your practice to any member of the public requesting the information and making it available through the publication of the health and care professions Register;
- transferring your personal data to professional advisors and other third parties involved with the regulation of health and care professionals;
- statutory and regulatory compliance;
- monitoring equality and diversity information;
- reviewing your medical records and history, including but not limited to any medical reference supplied, to ensure that your health does not impair your fitness to practice;
- maintaining photographic images of you to ensure your identity;
- informing you about the activities of HCPC;
- marketing the activities of the HCPC;
- transferring your personal data to any business directory so as to ensure only authorised people advertise their services in such directories;
- keeping you informed about any changes to practice or legislation that may affect your practice;
- responding to requests for information from other regulators both within the European Economic Area and worldwide;
- keeping you informed about any developments, activities or products of third parties which may affect or assist your practice; and
- achieving the general and statutory objectives of the HCPC.

We collect personal information from you when you communicate with us by any media. We may also collect personal data which relate to you from third parties.

We may contact you by means of electronic communication, including but not limited to email or SMS for the purposes set out above. We will only undertake activities considered to be electronic marketing if permitted to do so by the Privacy and Electronic Communications (EC Directive) Regulations 2003.

Sensitive personal data

Certain personal information is categorised by the 1998 Act as 'Sensitive Personal Data' as defined by the 1998 Act.

In some circumstances, the HCPC will process your sensitive personal data. We are required to hold such sensitive personal data by the Health and Social Work Professions Order 2001 and therefore we do not need to obtain your consent to undertake this processing. In general, the sensitive personal data collected by HCPC is limited to information in connection with:

- your racial or ethnic origin;
- your physical or mental health or condition;
- whether a member of a trade union (within the meaning of the Trade Union and Labour Relations (Consolidation) Act 1992);
- the commission or alleged commission by you of any offence;
- any proceeding taken against you for any offence committed or alleged to have been committed by you; and
- your sexual life

Anonymisation

The HCPC is required to provide statistical information to a number of different bodies; it also undertakes its own research. In such circumstances it only provides anonymised data.

Permitted processing

The HCPC ensures that it is permitted to process your personal data. If no statutory condition applies to the form of processing we undertake, we can only undertake such processing with your consent. You may withdraw your consent to our processing your personal data for some of the above purposes by writing to the address at the end of this statement.

If a statutory condition applies allowing the HCPC to process your personal data and you withdraw consent to process your personal data this will not necessarily mean that HCPC ceases to process your personal data as the HCPC keeps personal data on registrants for their lifetime.

Sharing your information

In some circumstances the HCPC may be required by law to share sensitive personal data about you to a third party. Otherwise the HCPC does not share sensitive personal data outside of the HCPC Group without your consent. Your personal data may be shared as set out in the above purposes. If you do not wish us to share your personal data with any third party for marketing purposes, please write to us at the address at the end of this statement.

European Economic Area (EEA)

Please note that information displayed on our Website or sent to the HCPC over the internet may be transferred outside of the EEA, where data protection laws are not as strong as within the EEA. The information displayed on the website is provided as it is necessary for the public interest. In relation to any information you send via the internet or email, if you have any concerns in relation to such transfers, you should not use the internet or email as a means of communication with the HCPC.

Monitoring of telephone calls and emails

Your telephone calls and emails to us may be recorded and monitored for quality control purposes. We may also intercept communications made to individual members of staff at the HCPC when this is required for business purposes.

Notification

The HCPC has notified the Information Commissioner that it processes personal data. The notification number is Z6621691.

If you have any queries relating to this statement, please contact us by letter at the following address:

The Health and Care Professions Council
Park House
184 Kennington Park Road
London
SE11 4BU

Useful terms

Agencies – may be any third party but would usually be a commercial business that makes money (by commission) on placing applicants in employment for a fee charged to the employer. If you choose to use an agency you should make sure they are reputable. Responsibility for your application remains with you and you must provide an address where you can be sure to receive correspondence from us.

Applicant – the person making the application for entry to the Register.

Continuing professional development (CPD) – any activity which serves to maintain or improve upon professional knowledge and practice. Once registered you are required to record what CPD you undertake (see HCPC publication Continuing professional development and your registration).

Data controller – a person who either jointly, alone or in common with other people determines the purposes for which and the manner in which any personal data are, or are to be, processed.

Data processor – any person other than an employee of the data controller, who processes the personal data on behalf of the data controller.

Data protection policy – this is the HCPC's statement of how we apply and comply with the rules contained within the Data Protection Act 1998.

Data subject – an individual on whom personal data are processed.

Declaration – this is the declaration you sign as part of the application form. You are signing to confirm each of the four elements of the declaration. This declaration is legally binding and you should only sign it if you are sure the information you are providing is correct.

Home address – the address of your main or only residence. This should be an address where you can be sure to receive correspondence from HCPC as we may need to contact you regarding your application.

HCPC – Health and Care Professions Council

Health and Social Work Professions Order 2001 – the legislation that governs the registration process and confers the responsibilities and authority to the HCPC to apply and administer the registration process.

Personal data – means:

- any data from which the identity of a living individual can be determined, either by itself or with other data processed by data controller; and
- any information such as name and address, email address, telephone number and general contact details, personal data includes images on film, photographs and telephone voice recordings.

Processing – means obtaining, recording or holding the information or data or carrying out any operation or set of operations on the information or data including:

- organisation, adaptation or alteration of the information or data;
- retrieval, consultation or use of the information or data;
- disclosure of the information or data by transmission, dissemination or otherwise making available; or
- alignment, combination, blocking, erasure or destruction of the information or data.

Relative – has been broadly defined by the Health and Care Professions Council (Registration and Fees) Rules 2003 (as amended) to include in relation to any person:

- (a) his spouse or civil partner;
- (b) any lineal ancestor, lineal descendent, brother, sister, aunt, uncle, nephew, niece or first cousin, of his or of his spouse or civil partner; or
- (c) the spouse or civil partner of any relative mentioned in paragraph (b),

For the purposes of deducing any such relationship ‘spouse or civil partner’ includes a former spouse or civil partner, a partner to whom the person is not married, and a partner of the same sex.

Sensitive personal data – means personal data consisting of information as to:

- the racial or ethnic origin of the data subject;
- political opinion;
- religious beliefs or other beliefs of a similar nature;
- whether a member of a trade union (within the meaning of the Trade Union and Labour Relations (Consolidation) Act 1992);
- physical or mental health or condition;
- sexual life;
- the commission or alleged commission of any offence; or
- any proceedings for any offence committed or alleged to have been committed, the disposal of such proceedings or the sentence of any court in such proceedings.

Work address – the main or only address of your current employment. If you are a sole practitioner and carry out home visits (eg chiropodist) then this may be the address where your practice is based. Only the area will be available to view on the public Register so your privacy and security remains protected.