|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Questions are followed by answer fields. Use the ‘Tab’ key to navigate through. Replace Y/N or Yes/No fields with your answer. | | | | | | |
| Before you fill in the form *To be completed by the Education Provider Placement Coordinator in consultation with the relevant NT Health Placement Coordinator. Return completed form to the NT Health Placement Coordinator.* | | | | | | | |
| Fields marked with an asterisk (\*) are required.  Fields marked with a caret (^) are for office use only. | | | | | | | |
| Student details | | | | | | | |
| Name\* | |  | | Contact Details\* |  | | |
| Resides in NT?\* | | Y/N | | Is this a Domestic or International student? \* | Domestic  International | | |
| Education Provider | | | | | | | |
| TAFE / University name | |  | | | | | |
| Placement Coordinator | |  | | | | | |
| Contact Details | |  | | | | | |
| Placement Request | | | | | | | |
| Course\* | |  | | Discipline\* |  | | |
| Year level\* | | Choose an item. | | Unit code\* |  | | |
| Commencement Date(s)? \* | | Click or tap to enter a date. | | End Date(s)? \* | Click or tap to enter a date. | | |
| Preferred clinical area\* | |  | | Is the student Aboriginal or Torres Strait Islander | Y/N | | |
| Education Provider Pre-Clinical Assessment | | | | | | | |
| 1. I have made the Student(s) aware of the terms and conditions under which Student Placements are conducted. | | | | | | |  |
| 1. I have provided the Student(s) with access to the:    1. Northern Territory Public Sector Principles and Code of Conduct;    2. DOH Privacy Policy; and    3. DOH policies and procedures. | | | | | | |  |
| 1. I declare that I have sighted and, if required, can provide copies of the following documentation in relation to the Student(s):    1. proof of identity;    2. an up to date Immunisation Record;    3. a Criminal History Check issued not more than 6 months prior to the Commencement Date;    4. a current Clearance Notice under the Care and Protection of Children Act (NT); and    5. a Deed of Undertaking signed by the student and duly witnessed. | | | | | | |  |
| Office use only^ | | | | | | | |
| Name^ | |  | | | | | |
| Organisation^ | |  | | Priority Placement Assessment^ | | Choose an item. | |
| Placement confirmed^ | | | Y/N | Details^ | |  | |
| End of form | | | | | | | |

Associated links

* [Northern Territory Public Sector Principles](https://ocpe.nt.gov.au/nt-public-sector-employment/Information-about-ntps-employment/code-of-conduct)
* [Code of Conduct](https://ocpe.nt.gov.au/__data/assets/pdf_file/0006/379329/ei-12-code-of-conduct.pdf)
* [NT Information Privacy Principles](https://infocomm.nt.gov.au/privacy/information-privacy-principles)

**These documents are available to NT Health staff only on the Policy Guideline Centre:**

If you require access to these please contact the NT Health Placement Coordinator.

* [Worker Immunisation against Specified Vaccine Preventable Diseases NT Health Policy](http://internal.health.nt.gov.au/clinical/health-care-worker-immunisation/Pages/default.aspx)
* [Guidelines for the Control of Tuberculosis in the Northern Territory; 5th Edition](http://digitallibrary.health.nt.gov.au/prodjspui/bitstream/10137/696/4/TB%20Guidelines%20May%202016.pdf)
* [Hand Hygiene NT Health Policy](http://internal.health.nt.gov.au/PGC/DM/Documents/Public%20Health/Clinical%20Quality%20Patient%20Safety/Hand%20Hygiene%20NT%20Health%20Policy.docx)
* [Additional precautions NT Hospitals Guideline](http://internal.health.nt.gov.au/clinical/infectioncontrol/Pages/default.aspx)
* [NT Health Appropriate Workplace Behaviour Policy](http://internal.health.nt.gov.au/pgc/dm/Documents/POC/HR%20Policy%20and%20Systems/Workplace%20Behavior%20and%20Responsibilities/Appropriate%20Workplace%20Behaviour%20and%20Sexual%20Harassment%20NT%20Health%20Policy.docx)
* [Manual handling checklist](http://internal.health.nt.gov.au/PGC/DM/Documents/POC/WHS/Manual%20Handling/Manual%20Handling%20Checklist%20With%20Remedial%20Action%20Plan.docx)
* [NT Health Work Health and Safety Policy](http://internal.health.nt.gov.au/services/emergency-safety/safety/Pages/default.aspx)
* [NT Health Personal Presentation Policy](http://internal.health.nt.gov.au/PGC/DM/Documents/POC/HR%20Policy%20and%20Systems/Workplace%20Behavior%20and%20Responsibilities/Personal%20Presentation%20NT%20Health%20Policy.docx)
* [NT Health Staff Identification Policy](http://internal.health.nt.gov.au/pgc/dm/_layouts/15/WopiFrame.aspx?sourcedoc=%7b762EE8B4-C86E-4AF8-AFB0-CA213F90C04A%7d&file=NT%20Health%20Staff%20Identification%20Policy.docx&action=default&DefaultItemOpen=1)
* [Smoke Free Policy](http://internal.health.nt.gov.au/clinical/mental-health-aod/mh-aod/alcohol/smokefreepolicy/Pages/default.aspx)
* Emergency Procedures – venue dependent
* Fire and Smoke (Code Red) Procedures – venue dependent