**Imperial College London Intercalated BSc Programme**

**Letter of Good Standing**

**To be completed by the Head of Programme or Programme Administrator at the applicant’s home institution on institutional letterhead**

**Applicant full name**: ……………………………………………………………………………….....

**Intercalated BSc applied for**: …………………………………….………………………………..

The above-named individual has applied to study a one-year intercalated BSc programme at Imperial College London.

As the applicant’s home institution, please confirm the following:

1. Is this student currently the subject of any disciplinary proceedings at your institution?

Yes  No

2. Is this student currently the subject of any Fitness to Practise Medicine proceedings at your institution?

Yes  No

3. Has this student previously been the subject of a disciplinary proceeding and/or Fitness to Practise Medicine proceeding at your institution?

Yes  No

4. We grant permission for this student to study a one-year intercalated BSc programme at Imperial College London, should their application be successful.

Yes  No

**Name**: …………………….…………………………………..……………………………………..................

**Position**: ………………………………………………………………………………………………...............

**Signature**: ………………………..……………………. **Date**: …………………………….....................

**To be completed by the applicant**

Please confirm that you agree to the following:

1. I understand that if my home institution has responded ‘yes’ to questions 1, 2 or 3 on page 1 of this form, I will be required to provide further information. Depending on the nature of the disciplinary concerns, this could affect my application outcome.

Yes  No

2. I understand that if any concerns arise around my conduct and capability while I am intercalating at Imperial, sufficient details would be shared with my home institution so they can conduct their own investigation, if required.

Yes  No

Please provide the name and email address of the Head of Programme at your home institution, who would be contacted in the above instance.

Name: ……………………………………………..……………………………………......

Position: ………………………..…………………………………………………………...

Email: ............................................ Phone no: ...................................

3. I understand that if any serious welfare concerns arise while I am intercalating at Imperial, the university may inform a member of the Student Support/Welfare Team at my home institution\* to allow for appropriate support to be place following the completion of my BSc.

\*Details of the welfare situation would not be shared without prior discussion or agreement from you, except where safeguarding concerns arise.

Yes  No

Please provide the name and email address of a contact in the Student Support/Welfare Team at your home institution, who we would contact in the above instance.

Name: ……………………………………………..……………………………………......

Position: ………………………..…………………………………………………………...

Email: ............................................ Phone no: ...................................

**Applicant Name**: ……………………………………………..…………………………………….................

**Signature**: ………………………..……………………. **Date**: ……………………………........................