

Cabrini Health Medical Student Electives Program - Student Acknowledgement and Undertaking

I acknowledge that:

- I am not an employee of Cabrini Health for the purpose of Placement;
- I am familiar with the Australian Charter of Healthcare Rights;
- I am aware that unlawful disclosure of patient information is a criminal offence;
- I have informed my education provider and provided all relevant details if:
 - I have ever had any restrictions on my student registration with the relevant National Board;
 - I have ever been disciplined by a relevant professional body;
 - I have ever been imprisoned or found guilty of a violent or sex offence;
 - I have been found guilty of a criminal offence (other than a minor traffic offence) in the past 10 years in either Australia or overseas; or
 - I am currently subject to charges or under investigation for a criminal offence (other than a minor traffic offence).

In relation to my Clinical Placements, I undertake that:

- I will not communicate, publish or release any confidential information of Cabrini Health and will keep all patient information strictly confidential;
- I will comply with all policies, procedures and reasonable directions of Cabrini Health;
- I will behave at all times in such a way as to cause no unreasonable or unnecessary disruption to the routines or procedures of Cabrini Health or its patients or staff;
- I will promptly notify both my education provider and Cabrini Health if:
 - I am unable to attend Placement as scheduled for any reason;
 - I feel unwell or my health status changes;
 - Any accident or incident occurs;
 - Any restrictions are placed on my student registration with the relevant National Board;
 - I am disciplined by a relevant professional body;
 - I am found guilty of a criminal offence (other than a minor traffic offence); or
 - I am charged or investigated for a criminal offence (other than a minor traffic offence).

Signature of Student

Date