

**Wellbeing Services Prospective Student Form**

This form is for completion by our prospective students so that we can learn more about you.

Please complete the form below to let us know about any specific requirements you have while you are at the University. Please ensure that you have your supporting evidence ready to upload before completing this form. If you are unsure whether your evidence is appropriate, please upload it and we can advise you if we need anything further.

Please be aware that if you submit your form after the 31st of July 2025, we may not be able to put your support in place before the start of your course. We encourage you to complete the form as soon as possible, especially if you require adjustments such as practical assistance during your studies, specific equipment to be in place when you start, or if you need adaptations to your accommodation, such as a hoist.

**Informing us of your consent**

Please note we are a student-led service. Depending on your individual support requirements your information may be shared with the following people as appropriate:

* Your College
* Exams Team
* Accommodation and Estate Team
* Health and Safety Office

Ensure you read the following with regards to how your information may be shared with other staff within the University - [**Declaring a Disability or Health Condition**](https://www.exeter.ac.uk/v8media/specificsites/wellbeing/documents/Declaring_a_Disability_or_Health_Condition.pdf)**.** Please see our [**Privacy Notice**](https://www.exeter.ac.uk/students/wellbeing/devon/about/policies/) if you have any queries with regards to your personal data.

**Information for parents and carers**

Please see more information for parents and carers on our [**dedicated webpages**](https://www.exeter.ac.uk/students/wellbeing/).

**Funding information**

For information, advice and guidance on funding your support while at University, including details on the Disabled Students’ Allowances (DSA), please see our [**webpage explaining how to claim DSA**](https://www.exeter.ac.uk/students/wellbeing/support/fundingyoursupportdisabledstudentsallowance/) and more.

**Future correspondence**

Any correspondence we send you will be sent to the email address you used in your UCAS application (or your direct application if you didn’t go through UCAS). Please ensure this is your personal up-to-date email address, as otherwise you may not receive important updates from our advisors. Please click [**here**](http://www.ucas.com/ucas/undergraduate/apply-and-track/track-your-application/making-changes-your-ucas-undergraduate-application) for instructions on how to update your email address with UCAS.

Please note: questions marked (\*) are required.

|  |  |
| --- | --- |
| **Personal details and course information** | |
| First Name:\* |  |
| Last Name:\* |  |
| Preferred name: |  |
| Pronouns: |  |
| Exeter Reference Number, e.g. 710045678: |  |
| Date of birth e.g. 20/09/1988:\* |  |
| Email address:\* |  |
| Mobile number: \* |  |
| Course name: \* |  |
| Which campus will you study on? \* | Streatham  St Luke's  N/A - distance learner |
| Level of study:\* |  |
| Start date: \* |  |

|  |  |
| --- | --- |
| **Your condition and how it impacts you** | |
| 1) Please complete the following declaration with relevant disability/health condition. You can select more than one. \* | No known impairment, health condition or learning difference  Social/communication conditions such as a speech and language impairment or an autistic spectrum condition  Blind or have a visual impairment uncorrected by glasses  Deaf or have a hearing impairment  Long-term illness or health condition such as cancer, HIV, diabetes, chronic heart disease, or epilepsy  Mental health condition, challenge or disorder, such as depression, schizophrenia or anxiety  Learning difference such as dyslexia, dyspraxia, or AD(H)D  Physical impairment (a condition that substantially limits one or more basic physical activities such as walking, climbing stairs, lifting or carrying)  An impairment, health condition or learning difference not listed above  Developmental condition that you have had since childhood which affects motor, cognitive, social and emotional skills, and speech and language  Prefer not to say  Disability – prefer not to say |
| 2) Please describe your medical condition/physical disability/mental health diagnosis or specific learning difference: \* |  |
| Please let us know the main areas affected by your medical condition/physical disability/mental health diagnosis or specific learning difference: \* | Fluctuations in mood  Fluctuating anxiety levels  Concentration  Motivation  Confidence  Energy levels / fatigue  Reading speed / accuracy  Note taking  Organisation  Motor Co-ordination  Handwriting  Processing speed  Short-term memory  Communication/social difficulties  Physical health  Attendance  Heightened stress in relation to deadlines  Sleep  Eating & appetite  Presentations  Participation in class discussions  Answering questions in class  Establishing a routine  Mobility within buildings e.g. difficulty with stairs/ opening doors etc (please provide more detail in above text box)  Mobility around campus – difficulty travelling long distances/navigating hills, slower speed of travel etc (please provide more detail in above text box)  Group work  Completing exams  Field trips  Lab work |

|  |  |
| --- | --- |
| **Academic Adjustments at University** | |
| 3a) Have you had any academic adjustments previously? Please note these will not automatically continue at the University. \* | Yes/No |
| 3b) Please tick any previous exam adjustments you have received: \* | Extra time  Reader  Scribe  Computer use  Rest breaks  Smaller room  Alternative Assessments (please give details below)  Other (Specify adjustment) |
| 4) Does your health condition/disability have a significant impact on your accommodation requirements, e.g the location and accessibility, type of room, adaptions needed, catered or self-catered? Please give details. \* |  |
| 5) If you would like to give us any further details about your support requirements or previous support you have received, please do so here: \* |  |

|  |  |
| --- | --- |
| **Mental Health Support** | |
| 6) Are you currently being supported by a mental health service or practitioner (e.g. Doctor, psychiatrist, Community Mental Health Team, or other relevant services)?\* | Yes/No |
| 7) So we can offer any advice on mental health support available to you, it would be helpful if you can tell us more about what support you have been accessing, including details of any medication. Please provide this in the text box. | *Please consider responding to this if you have answered ‘Yes’ to question 6.* |
| 8) Have you received support from a mental health service or practitioner over the past 2 years including any hospital admissions or support from the Home Treatment Team? \*  Please can you tell us any further details about the support you have received: | Yes/No |
| 9) Have you previously taken time out from or repeated your studies for health-related reasons?\*  Please can you tell us any further details that might assist us in offering you support: | Yes/No |

|  |  |
| --- | --- |
| **Living arrangements** | |
| 10)Does your health condition/disability impact on your accommodation (housing) requirements? e.g. an en-suite or studio room, catered or self-catered, quiet flat, room adaptions such as a hoist, ground floor/lift access, a mini fridge for medication storage etc? If so, please give details in the box.  You may find the information on the Accommodation Adjustments webpage helpful, including details of a financial subsidy at the bottom of the page: <https://www.exeter.ac.uk/study/accommodation/choose/adjustments/’> | Yes/No |

|  |  |
| --- | --- |
| **Health and Safety** | |
| 11) Can you independently leave the building in a reasonable time, including use of stairs at all times?\* | Yes/No |
| 11a) Please give further details if the answer to this question is ‘No’, otherwise please put N/A.**\*** |  |
| 12) Are there any circumstances where you may have difficulty evacuating in a timely manner? E.g. hearing the alarm/during a medical episode including fainting, loss of consciousness / migraine, panic attack / sensory overload\* | Yes/No |
| 12a) Please give further details if the answer to this question is ‘Yes’, otherwise please put N/A.\* |  |

|  |  |
| --- | --- |
| **Funded Support**  If you have a disability, mental health condition, neurodiversity, chronic illness and/or learning difference, you may be able to access additional support via Disabled Students’ Allowance (DSA).  This can fund assistive software/technology, assistive software training, ergonomic equipment, and regular specialist study skills tutoring or specialist mentoring appointments throughout the academic year. We strongly encourage you to apply for this as early as possible as it can take up to 14 weeks to apply. Depending on your funding body, students starting courses in September can usually apply for DSA once they’ve completed their Student Finance application, which opens in March/April.  Please see further information about the support available on the [Diversity and Ability webpages](https://www.diversityandability.com/dsa-find-your-way/). | |
| 11) Have you applied for Disabled Students Allowance (DSA)?  Tick the option which applies to you: | Yes  Not yet  Not eligible to apply  Not intending to apply |
| 12) If you apply for DSA, the University may be asked to confirm your course details with the relevant funding body. It may also be helpful for us to contact your DSA Needs Assessment Centre and Non-Medical Helper (NMH) supplier on your behalf if there are queries relating to your DSA application. Do you give permission for Wellbeing Services to liaise with the relevant funding body, DSA Needs Assessment Centre and NMH provider to ensure your DSA support can be put in place?  Tick one of the options in the box: | Yes, I consent  No, I don’t consent  Not Applicable |

|  |
| --- |
| **Supporting evidence** |
| Please upload any supporting evidence of your disability or health condition(s).  If you are unsure what supporting evidence might include, have a look at our Supporting Evidence [webpage](https://www.exeter.ac.uk/students/wellbeing/support/medicalevidence/).  If you have any questions about this form you can contact the team at [wellbeing@exeter.ac.uk](mailto:wellbeing@exeter.ac.uk) or call us on 01392 724381 for further advice. |

|  |  |
| --- | --- |
| **Declaration** | |
| 12) I confirm that the above information is correct to the best of my knowledge and that I have read the document 'Declaring a Disability or Health Condition'. I will inform Wellbeing Services of any change in my circumstances. I consent to my information being shared as outlined in this document: <https://www.exeter.ac.uk/v8media/specificsites/wellbeing/documents/Declaring_a_Disability_or_Health_Condition.pdf> | Yes/No |