



# Coláiste na Tríonóide, Baile Átha Cliath Trinity College Dublin

Ollscoil Átha Cliath | The University of Dublin

## Fitness to Study - Letter of Certification

**Instructions for Completion: A relevant Medical GP/Consultant/Specialist must complete this form. Please complete ALL sections below in BLOCK capitals. Please see guidance section below for explanation of numbered sections:**

Name, Title of GP/Consultant/Specialist: \_\_\_\_\_

Contact Telephone: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Medical condition/Disability diagnosis: \_\_\_\_\_

Original date of diagnosis (1): \_\_\_\_\_ Prognosis (2): \_\_\_\_\_

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When did you first see this student in relation to this current difficulty?: \_\_\_\_\_

Please state how often you have seen this student in the last 12 months (3): \_\_\_\_\_

Please list any medication and/or treatments this student is presently undertaking and who is responsible for monitoring of same?

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In your opinion, will this student will require ongoing supervision/monitoring of their condition over the next 12 months? **Yes**  **No**

If yes, state how often e.g. weekly  fortnightly  monthly  every 3/12  every 6/12

Who will provide this supervision (4): \_\_\_\_\_

Any additional supports the student is availing of:

Psychotherapy  Occupational therapy  Physiotherapy  Other  \_\_\_\_\_

**Having discussed the demands of college life with the student (5):**

Please turn over to complete. Guidelines for completion are on the final page

Is the student able to maintain a routine and manage self-care: **Yes**  **No**  **Other**  clarify below

Is the student able to manage the academic aspects of College: **Yes**  **No**  **Other**

Is the student able to manage the social aspects of College: **Yes**  **No**  **Other**

Is the student fit to live independently in Trinity managed accommodation (6): **Yes**  **No**

Is this student fit for placement/internship or foreign exchange placement? **Yes**  **No**  **Other**

In your opinion, is this person fit to return to study? **Yes**  **No**  **Other**

If not fit to study – why not

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Outline the effect the medical condition/disability may have on learning/attendance at College (State the impact, if any, on day-to-day activities) etc. or any additional comments (7):

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**Official Stamp**

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

## **Fitness to Study - Letter of Certification Guidance Document**

This document is a guide for those completing the Trinity College Fitness to Study - Letter of Certification. Please remember to complete **all sections** in Block Capitals

Students who for reasons of ill health (including on-going & recognised disability) have allowed their names to go off-books can only be re-admitted, even in the current year, at the discretion of the Dean of Undergraduate Studies/Dean of Postgraduate Studies. Such students will be required to submit a letter of certification to the Student Cases from a medical referee as evidence that they can continue their studies. The Dean of Undergraduate Studies/Dean of Postgraduate Studies may seek the advice of the Trinity Health & Student Counselling Service.

1. The original date of diagnosis may be important in terms of registration for exam accommodations as well as Trinity having an understanding if this is a long-standing issue or a new diagnosis for the student.
2. The prognosis may be an important factor when considering if the student should be encouraged to register for supports from the Disability Service so reasonable accommodations can be put in place following an assessment of need & a Learning Educational Needs Assessment (LENS) report.
3. **It is important to be aware that Trinity College cannot provide medium to long term medical, psychiatric or counselling services (Maximum 8 counselling sessions per year) for students.** If in your opinion the student will need on-going supervision/monitoring or psychological/medical support, please specify who will be responsible for this. The student must be referred to these prior to reengaging with college. The frequency of these appointments need to be stated and who is responsible for these.
4. Having a named external person who is responsible for the student's care would be very useful for the student and college as we can liaise with the person if there are any concerns regarding the student.
5. We are aware that academic pressures are just one of the difficulties for all students. In some cases, students may be deemed fit to study but may not be able to participate in social activities. If college are aware of this, it may mean a relevant care plan may be put in place for a student to ensure they have the best chance of completing the academic term.
6. The college also has a duty of care for all students and staff. Please bear this in mind when making your recommendations with regard to returning to campus or accommodation.
7. It is important to note any impact the disability/condition may have on academic performance or attendance. If the college is aware of these, they can be factored into a student's LENS report.

Please complete form as completely and accurately as possible