

Reasonable Adjustments Process: Level 2

RAP2 Commencement and Follow-Up Form

Student name					
Site name					
Week of overall placement	Week of (e.g	g. Week 6 of 10, Week 8 of 14)			
Date	//				
Names of all others present					
Summary of progress					
Does the student wish to discl	lose any matter that may be	affecting their practice?			
	aces Medical issues		Other 🗆		
Next steps					
1. Close RAP2					
2. Continue RAP2 [complete plan overleaf and review in approx. 5 working days]					



Action plan [as required]

Provide some brief evidence for each concern listed		SMART adjustments to be made by student		
		<u> </u>		
To whom will this process be disclos	sed?			
Date for review	/	/	or Not applicable □	
Date for review	/_	/	or Not applicable	
The undersigned have discussed, understood, and agree with, the information contained within.				
Name	Signature		Role	