**UK Foundation Programme 2026**

**Clinical Assessment Reasonable Adjustments Form**

You must email the completed and signed form with relevant evidence to the UKFPO team at [england.helpdesk.foundationprogramme@nhs.net](mailto:england.helpdesk.foundationprogramme@nhs.netk) by no later than **12:00 (midday, BST) on 18 September 2025.**

Red asterisk (\*) denotes a mandatory field.

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| --- | --- | --- | --- |
| **SECTION 1 – YOUR DETAILS** | | | |
| **\*** | **Full name:** | | Click or tap here to enter text. |
| **\*** | **Oriel PIN:** | | Click or tap here to enter text. |
| **\*** | **Email address:** | | Click or tap here to enter text. |
| **\*** | **Please describe why you require reasonable adjustments:** | | |
| Click or tap here to enter text. | | | |
| **\* Please describe the adjustments you require:** | | | |
| Click or tap here to enter text. | | | |
| **SECTION 2 – EVIDENCE** | | | |
| **You should attach any relevant evidence to support your claim. Please confirm if you have attached evidence.** | | Yes, evidence attached | |
| **SECTION 3 – DECLARATION** | | | |
| **\*** | **Signed:**  Typed, inked, or electronic signatures will be accepted | | Click or tap here to enter text. |
| **\*** | **Date:** | | Click or tap here to enter text. |