



Confidentiality Agreement and Declaration - Competence Test Centre

Please read and sign to say you have understood the following:

I hereby agree:

Signed:

- That I will not communicate or discuss any elements of the NMC's Nursing Associate OSCE exam, facilitated by the University of Northampton to a third party, except my OSCE feedback, which I am permitted to share with my employer, sponsor or my educational supervisor.
- 2. That I will not share, or have not shared, my log in details to any other party to give access to University information that relates to the NMC's Nursing Associate OSCE exam.
- 3. That I will not forward any examination material or information about the examination from the University of Northampton to a third party.

4. That I will act in a professional manner at all times and seek advice from University staff when on

University property, if a query arises.

Date: Signed: Print name:

5. That I am fit and well to undertake the OSCE exam today, on ____/___/__ and have declared (if appropriate) any request(s) for reasonable adjustment prior to my OSCE exam.

Date: Signed: Print name:

Optional:

The Test Centre/Nursing and Midwifery Council (NMC) may want to contact applicants for additional feedback/information in relation to the Overseas Registration/OSCE process. Please sign if you are happy to be contacted.

I hereby agree:

6. That I am happy for the Nursing and Midwifery Council (NMC) to contact me for additional

Email address (capitals):

feedback/information in relation to the Overseas Registration/OSCE process.