

## NEW EMPLOYEE HEALTH DECLARATION

Congratulations on your new post at the University of Reading. As part of your induction process, we ask that you complete a Health Declaration prior to you commencing your position. The purpose of completing this health declaration is to assess if any adjustments are required in the workplace to allow you to do your job.

Please note the information you provide on this form will remain confidential to Occupational Health.

PERSONAL DETAILS	
Full name	
Home address	
Date of birth	
Email address	
Daytime telephone	
Position offered	
School or Service Department	
Have you previously been an employee at University of Reading within the last 5 years?	

If the answer to any of the following questions is 'Yes', the Occupational Health Service may contact you to discuss this further. When answering these questions the guidance on the next page should to be considered.

PREVIOUS MEDICAL HISTORY	If yes, please give details here	
Are you experiencing any health problems?	No <input type="checkbox"/> Yes <input type="checkbox"/>	
Have you had any significant illness or time off work in the last 12 months?	No <input type="checkbox"/> Yes <input type="checkbox"/>	
Do you have any health problems that you think may affect your performance or safety in the job you have been offered?	No <input type="checkbox"/> Yes <input type="checkbox"/>	
Do you require any special aids/adaptations to assist you at work, whether or not you have a disability?	No <input type="checkbox"/> Yes <input type="checkbox"/>	

### Please read and sign the declaration below:

*By checking the box below, I certify that to the best of my belief the answers given above are true and complete. I understand that the medical information gained from this questionnaire and any subsequent investigation remain confidential but may be used by the Occupational Health Service to advise my employer on any reasonable adjustments that I may require to enable me to undertake the duties of the job I have been offered and I consent to the information being used for this purpose in line with The Equality Act 2010.*

	SIGN OR PRINT NAME	DATE
<input type="checkbox"/>		

Please return this form to: Occupational Health Service via email [occupationalhealth@reading.ac.uk](mailto:occupationalhealth@reading.ac.uk) or if you prefer, by post to 117a JJ Thompson Building, Whiteknights, PO Box 220, Reading RG6 6ED

**Explanatory Notes for completing a Health Declaration – Please do not write on this page, this is for information only.**

Are you experiencing any health problems?	<i>Please give details of any health problems that you have. These may be conditions that you are receiving treatment for or that you have been under the care of your GP or a Specialist for.</i>
Have you had any significant illness or time off work in the last 12 months?	<i>Please give details.</i>
Do you have any health problems that you think may affect your performance or safety in the job you have been offered?	<i>Please list any medical or health problems that you have this may include conditions which aren't always thought of as health problems such as Dyslexia, ADHD Dyspraxia etc.</i>
Do you require any special aids/adaptions to assist you at work, whether or not you have a disability?	<i>Please supply any details of any equipment you have been provided with in previous roles or that allows you to undertake any of your day to day tasks. e.g. Desk equipment.</i>

If you have any questions about completing this form, please contact Occupational Health on contact [occupationalhealth@reading.ac.uk](mailto:occupationalhealth@reading.ac.uk)