Background information form for an assessment of unsuitability for study

1. The name of the higher education institution ________________________________

has ordered

2. Student’s name ________________________________

3. personal identification number ________________________________

health examinations and examinations by a licensed health care professional. The aim of the research is to find out whether the student’s degree title meets the requirements for health status and functional ability. Based on the Vocational Education Act (630/1998, Sections 32 and 32a), the Adult Vocational Education Act (631/1998, Section 11 (9) and (10)), the Polytechnics Act (932/2014, Section 34) and the University Act (558/2009, 43 and b) §).

Reasons for requesting an opinion from the education provider or university and a description of the tasks that the student has difficulty in completing:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Description of the measures taken at the educational institution to remove barriers to learning and their effects:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Place and time__________________________

Signature and name of the higher education institution representative

Appendix: Degree-specific health status and functional ability requirements