



UK Health
Security
Agency

Occupational Health and Staff Wellbeing (OHSWB) Functional requirements form

THIS FORM SHOULD ONLY BE COMPLETED BY THE SUCCESSFUL APPLICANT WHEN INSTRUCTED TO DO SO AS PART OF THE PRE-EMPLOYMENT CHECKS STAGE OF RECRUITMENT

The UK Health Security Agency aims to promote and maintain the health and wellbeing of all its employees. Please review the below statements and answer the declaration considering the below and requirements outlined in the job description. If you answer 'Yes' to any of the statements you may be requested to provide details in confidence to OHSWB to enable them to consider if any adjustments or assistance in the workplace may be recommended to support you to do the job. OHSWB may contact you if additional information is required, and you may be seen by an Occupational Health Advisor or Physician.

Do you have any illness, impairment or disability (physical or psychological) which may affect your work?

Have you ever had any illness, impairment, or disability which may have been caused or made worse by your work?

Are you having, or waiting for treatment or taking any medication or investigations at present?

Do you think you may need any adjustments or assistance to help you to do the job?



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Have you had any absence from work due to ill health during the last 2 years?