

Name: _____ PID: _____

Date: _____

Michigan State University Conviction Disclosure Form

The Michigan State Board of Education has authority under Part 10 Administrative Hearings of the Administrative Rules Governing the Certification of Michigan Teachers, to deny, suspend or revoke a teaching certificate (R 390.1201).

Students and certification candidates are asked to provide responses to critical questions prior to (1) admission to the teacher education program; (2) intern teacher placement; and/or (3) recommendation for initial certification, renewal of provisional certification, and professional certification. An applicant who has been convicted of a felony or misdemeanor may be denied admission, field placement, or recommendation for certification. An applicant who has been convicted of a felony or misdemeanor at any point during his or her academic program may, upon request, be granted a hearing prior to a final decision regarding admission, field placement, or recommendation for certification. Such a hearing will be initiated by the College of Education and referred to the Hearing Board of the Undergraduate Education Policy Committee for review and recommendation.

Supply the following information:

Please answer each question by checking "Yes" or "No". If you answer "Yes" to any question, please provide complete information on the back of this sheet.

- A. Have you been dismissed, resigned from, entered into a settlement agreement or otherwise left employment to avoid investigation and/or dismissal for alleged misconduct?
___ Yes ___ No
- B. Did you receive a discharge from the Armed Forces of the United States that was other than "Honorable"?
___ Yes ___ No
- C. Have you ever been convicted of a crime (misdemeanor or felony) other than a minor traffic violation, whether upon a verdict or plea of guilty or a plea of nolo contendere (no contest)? Have you ever received a suspended sentence for a crime or an attempt to commit a crime? Have you ever admitted responsibility for a civil infraction or an ordinance violation? ___ Yes ___ No

If you answered "Yes" to this question, you must provide a Register of Actions or Judgment of Sentence for the offense from the court in which you were convicted or admitted responsibility.

- D. Do you currently have any criminal charges pending against you? ___ Yes ___ No
- E. Have you ever had an application for a teaching credential in Michigan or any other jurisdiction denied?
___ Yes ___ No
- F. Have you ever had a teaching credential issued in Michigan or any other jurisdiction suspended, revoked, nullified, or otherwise invalidated? ___ Yes ___ No
- G. Have you ever had a teaching credential issued in Michigan or any other jurisdiction retain its validity with a conditional agreement? ___ Yes ___ No
- H. Have disciplinary proceedings ever been initiated against your Michigan teaching credential or a teaching credential issued by another jurisdiction? ___ Yes ___ No

(CONTINUED ON BACK)

If you answered yes to question C, please answer the following questions for each offense. (You may attach a separate sheet, if necessary.)

a) What was the offense? _____

Fully explain the circumstances. (Attach an additional page if necessary.)

b) What was the date of your conviction or admission of responsibility? _____

c) In what city, state, and country did this occur? _____

d) In what court? _____

e) Please provide any other facts that you consider relevant to this circumstance:

If you answered yes to any other question on the previous sheet, please note the item to which you are responding and fully describe the nature of the issue. (Attach an additional sheet, if necessary.)

RELEASE:

I declare and affirm, under penalty of committing fraud in the application process, that all the statements made in the foregoing application, including its accompanying statement or form, are true, complete and correct. I further declare and affirm that any conviction that occurs subsequent to the date of this application but prior to the issuance of any certificate will be reported, in writing, to the Certification Officer, 134 Erickson, Michigan State University, East Lansing, MI 48824.

By signing this form, I consent to the release of information to Michigan State University for the purpose of ascertaining my moral character and to the State of Michigan, Office of Professional Personnel Services, as necessary.

DATE _____

STUDENT #: _____

SIGNATURE _____

NAME (Print) _____

ADDRESS _____

E-MAIL _____

TELEPHONE _____