



SIENA HEIGHTS UNIVERSITY
Criminal Conviction Disclosure Form

Full Name (please print) _____

Student ID# _____

Current Employer/Position _____

Social Security Number* _____

(*optional; required for education tax credit and reporting Federal Tax Form 1098-T)

Pursuant to Public Act 138 of 2005, I represent that (check all that apply):

_____ 1. I have **not** been convicted of, or pled guilty or *nolo contendere* (no contest) to, or been the subject of a finding of guilt by a judge or jury of any crime.

_____ 2. This is my initial disclosure that I have been convicted of, or pled guilty or *nolo contendere* (no contest) to, or am the subject of a finding of guilt by a judge or jury for the following crimes (*Attach a separate sheet of paper to explain the criminal offense, date, court, city/state, and circumstances surrounding the conviction*):

- a. _____ which is a _____ Felony _____ Misdemeanor
- b. _____ which is a _____ Felony _____ Misdemeanor
- c. _____ which is a _____ Felony _____ Misdemeanor

_____ 3. This serves as disclosure of subsequent convictions of which I have been convicted, or pled guilty or *nolo contendere* (no contest), or am the subject of a finding of guilt by a judge or jury, for the following crimes (*attach a separate sheet of paper to explain the criminal offense, date, court, city/state, and circumstances surrounding the conviction*), and I understand that failure to disclose any subsequent convictions is considered to be a crime:

- a. _____ which is a _____ Felony _____ Misdemeanor
- b. _____ which is a _____ Felony _____ Misdemeanor
- c. _____ which is a _____ Felony _____ Misdemeanor

In signing this form, I understand and agree that:

4. The information I have supplied can and will be shared with the Michigan Department of Education (for Education students only). If I have been convicted of a listed offense, my application for teacher/counselor certification renewal or upgrade, or for an additional endorsement, may be denied.
5. If my current criminal history report(s) on file with my school district and/or the Michigan Department of Education is not the same as my representation(s) above, I may be accused of misrepresentation and/or fraud in application.

Signature: _____ Date: _____

SHU Representative Signature: _____

Position: _____

Date: _____

[FOR OFFICE USE ONLY]

- | | | |
|--|---|---|
| <input type="checkbox"/> Initial Application | <input type="checkbox"/> Practicum/Internship | <input type="checkbox"/> School Counselor License |
| <input type="checkbox"/> Endorsement/Certificate Renewal/Upgrade | <input type="checkbox"/> Other | |