

Name: \_\_\_\_\_ PID: \_\_\_\_\_

Date: \_\_\_\_\_

- I am an MSU undergrad applying for admission to the teacher preparation program.  
 I am applying for direct transfer admission to the teacher preparation program.  
 I am applying for admission to the teacher preparation program as a Post-Bachelor's student.  
 I am disclosing a conviction and requesting permission to continue in the teacher preparation program.  
 I am an applicant for internship (Graduate Certification or "GC") status.  
 I am an applicant for certification.

**Michigan State University  
Conviction Disclosure Form**

The Michigan State Board of Education has authority under Part 10 *Administrative Hearings* of the *Teacher Certification Code* 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 preparation program; (2) internship placement and/or (3) recommendation for initial certification, renewal of Standard, 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 referred to the College of Education Hearing Board for review and recommendation.

Please answer each question by checking "Yes" or "No". If you answer "Yes" to any question, please provide complete information on next page.

- A. Have you ever accepted responsibility for a civil infraction (excluding speeding tickets) or been convicted of (or pled no contest to) a misdemeanor or felony?  Yes  No
- B. Do you currently have charges pending against you?  Yes  No

If you answered yes to Question A or B, you must provide a Register of Actions or Judgment of Sentence for the conviction from the court in which you were convicted, admitted responsibility, or pleaded no contest.

- C. Have you had a teaching, school counselor, school psychologist, or school administrator certificate suspended or revoked?  Yes  No
- D. Is there currently action pending against your teaching, school counselor, school psychologist, or school administrator certificate?  Yes  No
- E. Have you ever surrendered a teaching, school counselor, school psychologist, or school administrator certificate?  Yes  No
- F. Has this conviction/infraction previously been disclosed to the MSU Certification Office?  
 Yes  No

If you answered yes to question A or B, please answer the following questions for each conviction. (Attach a separate page, 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? \_\_\_\_\_

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, 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, Michigan State University, 620 Farm Lane, Room 134, 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** \_\_\_\_\_