

Troy University School of Nursing

Disclosure of Legal Convictions and Arrests Statement for Nursing Students

As a precursor to participating in clinical learning activities, nursing students in the School of Nursing at Troy University must have completed and signed this “Disclosure of Legal Convictions and Arrests Statement for Nursing Students” which indicates understanding of the following statements and reporting of legal convictions.

I understand that it is a requirement for students enrolled in the School of Nursing to provide a true and accurate, signed statement indicating any legal convictions including but not limited to legal misdemeanor convictions, felony convictions, sexual offender convictions or governmental sanctions.

I understand that history of legal convictions or arrests while enrolled in the School of Nursing may prevent my participation in clinical activities and result in dismissal from the School of Nursing.

I understand that I have 24 hours to report any arrest to the appropriate Program Coordinator and that I will be unable to participate in clinical activities until the issue is resolved.

I further agree to, and hereby authorize, the release of my disclosure of legal convictions and arrests statement to an appropriate representative of the agency for the sole purpose of determining eligibility to participate in clinical activities within the agency.

I hereby consent to submit to a criminal background check as required by contractual agreements with clinical agencies.

For each of the statements below indicate your legal convictions by circling the appropriate response.

I (*have been*) (*have not been*) convicted of a misdemeanor crime within the last 7 years (repeated misdemeanor convictions). If yes please give date(s) and explanation:

I (*have been*) (*have not been*) convicted of a felony. If yes, please give date(s) and explanation:

I (*have been*) (*have not been*) convicted of a sexual offender crime. If yes, please give date(s) and explanation:

I (*have been*) (*have not been*) sanctioned by the Office of the Inspector General (OIG). If yes, please give date(s) and explanation: _____

(Additional explanation information may be provided on the reverse side.)

I do hereby swear or affirm that I have read and understand the requirements of this policy, I have reported true and accurate information regarding legal convictions, and I will comply with the requirements of this policy.

Date: _____

Student Printed Name: _____

Student Signature: _____