



Section One (To be completed by applicant)

Applicant: All applicants that respond YES to any of the disciplinary questions as part of their application must submit a disciplinary clearance form. Please complete section one entirely. To complete section two, submit this form to the Dean of Students or the designated official in charge of student disciplinary records at the institution where the disclosed conduct occurred.

Full Legal Name:				Date of Birth:			
Address:			City:		State:	Zip Code:	
Phone: ()	University Identification Number:					
I am applying for:	☐ Fall 20		Spring 20	[Summer 20)	
I hereby authorize	the release of the information	n below to the Univ	versity of South Flori	ida. <i>Please Initia</i>	l:		
Applicant's Signature:				Date:			
Completion of this questions regardir may be attached.	be completed by Dean or control is form is required as part of the student's disciplinary of After completion, please sends at the second of this student.	he University of S record. Please fill d this form via e-m	outh Florida's admis out section two of th ail, fax, or mail to the	is form entirely. e address listed	Any additiona on the bottom	l information you wish to of this form.	
	e, do the records of this stude		ation regarding disci	plinary action?	☐ Yes	☐ No	
If yes, please prov	vide the following information:						
Type of Incident(s) / Formal Charge(s):						
Date of Incident(s)):						
Finding:	☐ In Violation	☐ Not In Violation					
Sanction(s) Assign	ned:						
Did the student co	omplete sanction(s)?	☐ Yes	☐ No				
If no, please expla	iin:						
Is the student in go	ood disciplinary standing?	☐ Yes	☐ No				
If no, please expla	iin:						
High School/Colle	ge/University:						_
Please print your r	name:			Title:			
)						
School Official's S	ignature:					_ Date:	

E-mail: <u>priorconduct@usf.edu</u> Fax: (813) 974-9443 | Mail: 4202 E. Fowler Ave, ALN 109, Tampa, FL 33620