

LICENSING, CERTIFICATION & PROFESSIONAL PROGRAM HISTORY DISCLOSURE

Please note: This disclosure is NOT limited to your licensing, certification and professional program history in Idaho. Carefully read and respond to the disclosure questions below before signing this disclosure, as a lack of candor in making a full and complete disclosure may result in denial or revocation of your admission to the MSW program and/or your dismissal from the MSW program.

(1) Do you currently hold, or have you ever held, a professional license or certification from any state (e.g. LBSW, CADC)? Yes No

(2) If you answered "Yes" to Question (1), please list the state(s) in which you have held a professional license or certification: _____

(3) If you answered "Yes" to Question (1), have you ever been sanctioned by, or been found in violation by, the certifying body? Yes No

(4) Have you ever commenced another professional graduate program (e.g. counseling, social work, psychology)? Yes No

(5) If you answered "Yes" to Question (4), please list the school at which you commenced such program and the date you commenced the program : _____

(6) Have you ever commenced another professional graduate program and then left the program either voluntarily or involuntarily? Yes No

(7) If you answered "Yes" to Question (6), please list the school at which you left such program, the date you left the program, and whether you left the program voluntarily or involuntarily : _____

If you answered "Yes" to Question (3), please enclose with your application complete information with respect to all circumstances and the final result, if such has been reached. You must submit a complete narrative of the circumstances that occurred for each and every sanction or violation, including the year of disposition. You must also enclose copies of all applicable sanctioning and/or certifying body records. If you are unable to obtain any of the required records, you must submit documentation on official letterhead from the sanctioning or certifying body stating that the records are no longer available. **If you answered "Yes" to Question (6), please submit a letter from the previous graduate program stating that you left the program in good standing.** A "Yes" answer to the above questions does not necessarily mean you will be denied admission to the School of Social Work program. Additional documentation and/or information may be requested if the submission with your application is deemed insufficient.

I make the above full disclosure of my licensing, certification and professional program history from all jurisdictions.

CRIMINAL & SUBSTANTIATED ABUSE HISTORY DISCLOSURE

Please note: This disclosure is NOT limited to your criminal and substantiated abuse history in Idaho. Carefully read and respond to the disclosure questions below before signing this disclosure, as a lack of candor in making a full and complete disclosure may result in denial or revocation of your admission to the MSW program and/or your dismissal from the MSW program. **This must be completed in addition to obtaining the required criminal background check.**

(1) Do you currently have any criminal actions pending? Yes No

(2) Have you pled guilty to, no contest to, entered into a plea-in-abeyance, or been convicted of a misdemeanor in any jurisdiction within the past ten (10) years? (Motor vehicle offenses such as driving while impaired or intoxicated must be disclosed but minor traffic offenses such as parking or speeding violations need not be listed.) Yes No

(3) Have you ever pled guilty to, no contest to, or been convicted of a felony in any jurisdiction? Yes No

(4) In the past ten (10) years have you been allowed to plea guilty or no contest to any criminal charge that was later dismissed (i.e. plea-in-abeyance or deferred sentence)? Yes No

CRIMINAL & SUBSTANTIATED ABUSE HISTORY DISCLOSURE- Continued

(5) Have you ever been incarcerated for any reason in any county, state or federal correctional facility in any jurisdiction or been on probation/parole in any jurisdiction? Yes No

(6) Have you ever received notice from a state or local agency of substantiated child or vulnerable adult abuse, neglect, exploitation or abandonment? Yes No

If you answered "Yes" to any of the above questions, please enclose with your application complete information with respect to all circumstances and the final result, if such has been reached. You must submit a complete narrative of the circumstances that occurred for each and every criminal action, conviction, plea-in-abeyance, and/or deferred sentence, including the year of disposition, and also an explanation of your plans to cope with potential post-MSW limitations on your practice of social work. You must also enclose copies of all applicable police report(s), court record(s), and probation/parole officer report(s). If you are unable to obtain any of the required records, you must submit documentation on official letterhead from the police department and/or court indicating that the documentation is no longer available.

A "Yes" answer to the above questions does not necessarily mean you will be denied admission to the School of Social Work program. Additional documentation and/or information may be requested if the submission with your application is deemed insufficient.

I hereby make the above full disclosure of my criminal and substantiated abuse history from all jurisdictions.

APPLICANT'S VERIFICATION OF CANDOR & ACCURACY

My application for admission to the Boise State University School of Social Work's Master of Social Work ("MSW") degree program is complete and accurate. I understand that an incomplete or inaccurate statement or representation in any of my application materials may result in denial or revocation of my admission to the MSW program, or if discovered after my admission, may result in my dismissal from the MSW program.

Applicant's Signature: _____

Date: _____

State of _____) County of _____)

On this _____ day of _____, 20____, before me, _____ a Notary Public, personally appeared _____, personally known to me or proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument, and acknowledged to me that he/she executed the same.

Seal _____

Notary Public My Commission Expires on _____

Residing at _____