Study Abroad Conduct Form

<u>Instructions for the Student:</u> Please complete section I of this form and then take the form to the conduct office on your home campus. Then send to the Office of Global Initiatives/Suite 248 (address above). <u>Be sure to fill in your name at the top of page 2.</u>

<u>Instructions for the home institution</u>: The student named on this form has authorized release of their conduct record and criminal history review to the *TC3 Office of Global Initiatives*. Please complete section II of this form and then **return both pages of this document** to us **directly** by mail or fax, or as a PDF scan. A prompt response is appreciated.

CAMPUS CONDUCT REVIEW

The State University of New York (SUNY) requires a conduct review of all applicants for its education abroad programs. It is necessary for us to be informed of any conduct record that exists for any participant. The existence of conduct records at the participant's home campus does not necessarily mean denial of admission to a program; however, the information must be reviewed by the education abroad office on the campus responsible for the program in order for a determination to be made. Each applicant, regardless of home campus, is required to provide this authorization even if there is no conduct record. Any falsification or omission of data may result in disciplinary charges under the Student Code of Conduct

FELONY CONVICTION

SUNY policy prohibits TC3 admission applications from inquiring into an applicant's prior criminal history. However, the College must seek information regarding a student's criminal history if the student engages in certain covered activities, including study abroad programs.

Under N.Y. State law, a felony is defined as a crime for which more than one year in prison may be imposed. If you have been convicted of a felony as an adult, you should answer YES to the felony conviction question below. If you have been adjudicated as a juvenile or as a youthful offender, or if your conviction has been sealed, you should respond NO to the felony question below.

Responding YES to the question below will not automatically prevent your participation in study abroad, but you may be required to provide additional information. This information will be reviewed to ensure that your participation does not present an unreasonable safety risk. Any falsification or omission of data may result in disciplinary charges under the Student Code of Conduct.

For more information: https://www.tompkinscortland.edu/academics/non-academic-code-conduct

See next page.

I. To Be Co	mpleted by the Student:	
Last Name	First Name	Campus ID#
Home Camp	us	Program Title & Administering Campus
Have you e	ver been convicted of a felony?	_ yes no
If yes, what	t was the date of your last felony convi	riction?/ (Month/Year)
Have you e	ver been suspended, dismissed, or exp	pelled from a college or university for conduct issues?
yes	no	
	ecked to any of the questions above, s r at TC3 in room 248.	submit an explanation or ask to speak with the study abroad
Please give	your consent by agreeing with your s	signature to the statement below.
to provide of the campus	documentation and discuss all informa s at which I am matriculated with the a	nts and Privacy Act, I authorize relevant offices at my home campuation related to any student conduct and criminal history review of appropriate study abroad office staff members and, if appropriate the purpose of determining my participation in an education abroa
Student Sign	nature	Date Release Signed
This release	e expires and is no longer valid at the e	end of the term in which you will be studying abroad
II. <mark>For appli</mark>	icants NOT CURRENTLY ATTENDING TO	C3, to Be Completed by the Student Conduct Officer
Student's L	ast Name	Student's First Name
	The student named above has i mpus.	not received a conduct sanction (probation or higher) on our
2	The student named above has i	received a conduct sanction (probation or higher) on our campus
Eff	fective Dates:	
Le	vel of Sanction:	<u> </u>

Additional information may be attached. A representative of the discuss.	Global Initiatives office may contact you to
Printed Name of Individual Authorized to Complete This Form	Signature
Title	Date
Email address	Phone number

Please return both pages of this form directly to the Global Office – address below.