



College of Nursing and Health Sciences
Attestation Form

I _____ attest to the following (select one of the following):

_____ I have not been charged with, or convicted of, a criminal offense nor have I become the subject of any criminal proceedings in any manner whatsoever.

_____ I have disclosed in writing to the Program Director or designee any charges or convictions that I have been the subject of, and any instance in which I have been the subject of any criminal proceeding.

Furthermore, I attest that I am a student in good standing at Florida International University.

I understand that I must inform the program director or designee in writing within 48 hours if at any time I am convicted/charged with a criminal offense, have become the subject of any criminal proceedings or if I am no longer considered a student in good standing at Florida International University.

I understand agencies may refuse my access to clients/patients based on information contained in my background screening reports or my status as a student at Florida International University. Agencies criteria for students may differ from the criteria of the College of Nursing and Health Sciences.

I release Florida International University, the Florida International University Board of Trustees, the Board of Governors, the State of Florida, and their trustees, officers, directors, employees and agents from any liability or damage in connection with the release of criminal background check.

If at any time during the course of my participation in a CNHS program I am either arrested, charged, or convicted, I must disclose such an event to the Program Director or designee in writing regardless of the nature or the seriousness of the offense for which I am arrested, charged, or convicted no later than 48 hours after such an event. Failure to do so may result in my dismissal from the program.

Student Signature

Department (Nursing, PT, OT, CSD, HSA ,or AT)

Student Name (Print)

Panther Number

Date