STUDENT INFORMATION ON ILLEGAL ACTIVITY

I understand that according to the Michigan Public Health Code the State Board of Licensure may refuse to grant or renew or may revoke or suspend a license on the following grounds:

   a. Substance abuse as defined in Section 333.6107
   b. Conviction of a misdemeanor or felony reasonably related to and adversely affecting the licensee’s ability to practice in a safe and competent manner. (Section 333.16221)
   c. Lack of good moral character. (Section 333.16221 (b) vi.)
   d. Conviction of a criminal offense relating to Criminal Sexual Conduct as identified in Public Health Code 333.16221 (b) vii.
   e. Conviction of a felony or misdemeanor relating to fraud as identified in Public Health Code 333.16221 (b) viii, ix; (c) i; (d) iii.
   f. Unprofessional conduct as described in Section 333.16221 (e).
   g. And any additional categories as described in Section 333.16221 of the Public Health Code.

Furthermore, I understand that in accordance with Michigan Public Acts 26, 27, 28 and 29 of 2006, criminal background checks are required for new employees at many health care facilities and agencies and for applicants for initial licensure or registration in health occupations.

I understand that if my answer is “Yes” to any of the following questions, additional information may be requested.

A yes answer may prevent admittance to or continuation in the Physical Therapy Program.

I agree that my answers to the following questions may be submitted to a validity check by university offices and by state agencies.

1. Have you ever been convicted of a felony? YES NO
2. Have you ever been convicted of a misdemeanor? YES NO

I hereby certify the above responses are accurate. I agree to notify the Director of the Physical Therapy Program immediately if responses to the questions change prior to matriculation or during my enrollment in the program.

_________________________________________  ______________________
Applicant Signature                             Date

12/19/06