



Dean of Students Certification Form

Required from all applicants who responded "YES" to: "Has disciplinary action been taken against you at any of the institutions you attended" on the Undergraduate Application.

To the applicant:

Please complete the information below and give this form, along with a stamped envelope addressed to: **Office of Student Conduct & Civility Education, Towson University, 8000 York Rd., Towson, MD 21252** to the Dean of Students at your most recent college or university. Your application will not be considered complete until this form is received.

Student Name: _____ Social Security # _____
Last First Middle Initial

I authorize _____ to provide the information listed below, regarding my
name of previous institution
personal disciplinary record, to Towson University as part of my application for admission.

Student Signature: _____ Date: _____

Student Mailing Address: _____
Number, Street, and Apartment or PO Box

City State Zip Country

To the Dean:

This form is to be used to report on the applicant's disciplinary record at your school. Your report will be handled with great care. It will be reviewed by the Towson University Admissions Office and the review committee as they decide on each student's application. In accordance with the Family Educational Rights & Privacy Act of 1974, matriculating students have access to their permanent files including forms such as this one. Your comments are important to us and we thank you for your assistance.

1. Is the applicant eligible to return to your institution? If no, please explain.

2. Has the applicant been the subject of any disciplinary action for conduct at your institution either on campus or off campus? If yes, please explain and include dates of action.

3. Are there any disciplinary charges pending? If yes, please explain.

4. Has the applicant been suspended, dismissed, expelled, or withdrawn from your institution for disciplinary reasons? If yes, please explain and include dates of action.

Additional comments:

Name: _____

Institution Name: _____

Address: _____

Phone: _____ Email: _____

Signature: _____