

# STOCKTON UNIVERSITY | GRADUATE STUDIES

## Certification of Good Standing and Disciplinary Records

### TO APPLICANT:

Please complete the Applicant portion of this form and ask an appropriate official in charge of student disciplinary records at your current institution to complete the form. Once complete, the certifying official should return this form, along with any necessary supplemental documentation, to Stockton University Office of Graduate Studies.

### Applicant to complete this section

By signing this form I permit my institution to release all disciplinary and/or academic information on my record to Stockton University.

\_\_\_\_\_  
Name of Student (please print)

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### TO CERTIFICATION OFFICIAL (Dean of Students, Conduct Officer, University Official, etc.)

The student whose name appears on this form has applied for admission to Stockton University. As part of the application process, the university requests information regarding all disciplinary actions involving the applicant. Please answer the following questions and provide any necessary supplemental documentation. Once complete, please return this form to the address listed above.

PLEASE DO NOT RETURN THIS FORM TO THE APPLICANT.

Is this student permitted to return to your institution?  Yes  No

Has disciplinary action ever been taken against this applicant?  Yes  No

If yes, please provide any relevant dates and a brief description of the offense and action:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Name of Official (please print)

\_\_\_\_\_  
Title and Institution

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date