



Residential Learning & University Housing
 Savitz Hall- 201 Mullica Hill Rd.
 Glassboro, NJ 08028
 856.256.4266
 www.rowan.edu/rluh

Pre-Employment Student Conduct Clearance Form

Applicant Instructions: This form must be submitted to the Dean of Students or other appropriate official at each higher education institution you have attended previously. Information that indicates you have been found responsible for violation of university policies will be highly scrutinized, but will not automatically preclude employment.

To be completed by Applicant:

Applicant's Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ E-Mail: _____

Responding Institution Name: _____

Student ID Number at Responding Institution: _____ Last Term Enrolled: _____

By my signature below, I authorize the responding institution named above to release any information from my educational records that is necessary to respond to this request for information to Rowan University. Regarding my right of access to this document and the associated response, I

Waive my right of access. *Do not waive my right of access.*

Signature: _____ Date: _____

To the responding institution:

The person submitting this form is applying for a graduate student employment at Rowan University. This position involves access to student records and sensitive/confidential information, access to master keys, and contact with students during crises and situations during which they may be especially vulnerable.

Do you have any information that would lead you to believe this person should not be hired into a position of trust? If so, please attach an explanation on a separate sheet or letter.			<input type="checkbox"/> No <input type="checkbox"/> Yes
While enrolled at your institution, has this student been found responsible for violation of any policy or rule of the institution?			<input type="checkbox"/> No <input type="checkbox"/> Yes
If yes, please provide a summary of the date, nature of the violation, and sanction. Attach a separate form or letter if needed.	Date	Nature of Violation	Sanction

Form Completed by:

Signature: _____ Date: _____

Title: _____

Phone: _____

E-mail: _____

Please send this form directly to:

Travis Douglas,
 Director for Residential Learning
 Residential Learning & University Housing
 Savitz Hall
 201 Mullica Hill Road
 Glassboro, NJ 08028

Fax: 856-256-4475

E-mail: douglast@rowan.edu