



Authorization for Background Check for Entry into the
East Tennessee State University Educator Preparation Program

Name _____ E# _____

Program of Study _____

Reason for Background Check _____ (If for a field placement, write course number)

Tennessee Code Annotated §49-5-5610 requires that any student wishing to enter an approved teacher education program must undergo a criminal history check and fingerprinting by the Tennessee Bureau of Investigation. The law also requires the student to sign an authorization and release form authorizing a qualified Tennessee Licensed private investigation company to complete a criminal history records check, if necessary.

*Payment of any reasonable costs incurred by the Tennessee Bureau of Investigation or other entities in conducting fingerprinting and background investigation is the responsibility of the student. **This disclosure form and the background check remain in effect until a new background check is required unless the student is not enrolled in a semester, then a new background check and disclosure form is required.***

**In the event a student has never resided in the United States and a criminal history report is unavailable, a copy of a background check or police certificate from their country of residence is required to complete Educator Preparation courses that include a field experience component.*

REPORT OF ARREST OR CONVICTION

1. Have you ever been arrested or convicted of a crime? YES ___ NO ___ If yes, indicate dates, the nature and final disposition of ALL offenses:

*By signing this form, I certify under penalty of law that the statements made in this form are true, correct and complete. I understand that false statements herein, including, without limitation, any failure to accurately report any arrest or convictions shall subject me to disciplinary action, up to and including removal from the Educator Preparation program, as well as possible criminal prosecution. **I agree to notify the Director of Field Experiences and Residency of any arrests/convictions within 5 days or prior to entering a school setting.** I agree to release and hold harmless East Tennessee State University from all liabilities associated with information or actions associated with this information.*

Print full name: _____
first middle last

ETSU Email address: _____ DOB: _____

Signature: _____ Date: _____