

**Student Conduct**

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## Self-Disclosure of Arrest(s)/Conviction(s) Form

**Student Information:**

Last Name		First Name		MI	
Student ID#		Birthdate		Cell/Local Phone #	
VT Email Address		Address		City	
State		Zip Code			

**Arrest/Conviction and/or notice of Protective Order Information:**

Charge(s) or issuance of a protective order:

Incident Location	City	County	State	Date	
Court/Jurisdiction					
Date of Next/Last Hearing					
Have you pled or been found guilty?		Yes <input type="checkbox"/>	No <input type="checkbox"/>	Were charges dropped?	
If guilty, what charges were you convicted of?				Yes <input type="checkbox"/>	No <input type="checkbox"/>

Describe sentence or action imposed by the court (eg: period of actual or suspended incarceration, educational program, fine, etc.)

Are you currently on Probation or Parole? Yes  No

Has the University Conduct System taken action on this incident(s)? Yes  No

If yes, provide any information you have on your student conduct record:

Signature \_\_\_\_\_ Date \_\_\_\_\_

<b>For Office Use Only</b>				<small>Revised 4/14/11</small>	
Reviewed by:	_____	Date	_____		
Student Conduct Action?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Entered into Database	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Checked Admissions?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Case #:	_____	
Notes:					
_____					

*Invent the Future*