



University of Windsor
Faculty of Nursing

Attestation of Notification of Change in Criminal Record Status

I acknowledge that it is my duty to inform the Faculty of Nursing Associate Dean at the University of Windsor of any change (i.e. charges or convictions of a criminal offense) that occurs in my police record since my last police clearance was obtained. Failure to do so may result in withdrawal from all clinical courses offered in the Faculty of Nursing.

Please print clearly:

Last Name: _____ First Name: _____

Student number: _____

I am an undergraduate student entering year: 1 2 3 4

or

I am a graduate/NP/Oncology/Palliative Care student

Date (yy/mm/dd): _____ Signature: _____

Re: Collection of Personal Information - The personal information collected on this form is collected under the authority of the University of Windsor Act and is collected for clinical placement requirements in the Faculty of Nursing. If you have any questions about the collection of the personal information on this form, please direct your questions to Sheema Inayatulla (Assistant to the Dean, Faculty of Nursing) at sheemai@uwindsor.ca or 253-3000 (x2281).