



Character and Fitness

MUST BE COMPLETED

Name _____ Social Security No. _____

Address _____
Street City State Zip

Telephone _____

Answer each question by circling "yes" or "no." If you answer "yes" to any question, you must submit a full explanation using a separate sheet of paper.

If you have ever held, or currently hold, a certificate, license, credential, or other document issued to you for practice as a professional social worker by any jurisdiction within the United States or abroad, provide the following:

State or Jurisdiction _____ Certificate Number _____

Type _____ Issue Date _____ Expiration Date _____

1. Have you ever had a certificate, license, credential, or other document issued to you for practice as a helping professional denied, suspended, revoked, or voluntarily surrendered? **YES | NO**
2. Are you currently being reviewed or investigated for purposes of such action as stated in #1 or is such action pending? **YES | NO**
3. Have you ever been dismissed, resigned, or asked to resign/retire or discharged from a professional position or military service for immorality, incompetence, willful neglect of duty, misconduct, or presenting false information toward obtaining the position? **YES | NO**
4. Is any such action as stated in #3 pending? **YES | NO**
5. Have you ever been convicted of a felony or misdemeanor (other than a moving traffic violation), been found guilty or entered a plea of nolo contendere (no contest), even if adjudication was withheld, in Kentucky or any other state? **YES | NO**
6. If you indicated "yes" to any items, #1 through #5, please provide any clarification desired below:

I affirm and declare that all information given by me on this form is true, and correct, and complete to the best of my knowledge. I understand that any misrepresentation of facts, by omission or addition, may result in the denial or revocation of admission.

Signature _____ Date _____