

STATE UNIVERSITY OF NEW YORK
Overseas Academic Programs

JUDICIAL REVIEW FORM FOR STUDY ABROAD

The State University of New York requires a judicial review of all applicants for its study abroad programs. It is necessary for us to be informed of any judicial record that exists for any participant. The existence of judicial records at the participant's home university does not necessarily mean denial of admission to a program; however, the information must be reviewed by the Study Abroad Office on the campus responsible for the program in order for a determination to be made. Each applicant, regardless of home campus, is required to provide this authorization even if there is no judicial record. Students must also inform their home campus Study Abroad Office about their intention to study abroad.

Instructions for the Student: Please complete Section I of this form and then take the form to the Judicial Officer on your home campus. Be sure to fill in your name at the top of page 2.

Instructions for the judicial officer: The student named on this form has authorized release of his/her judicial record to the Study Abroad Office at _____. Please complete the second section of this form and then **return both pages of this form** to us **directly** by mail or fax or as a PDF scan via email to the address/fax/email at the end of this form. A prompt response is appreciated.

I. To Be Completed by the Student:

Last Name

First Name

Campus ID#

Home Campus

Program Abroad & Administering Campus

Have you ever been convicted of a felony? ____ yes ____ no

If yes is checked, submit an explanation or ask to speak with the Director of Study Abroad at _____

Have you ever been suspended, dismissed, or expelled from a college or university? ____ yes ____ no

If yes is checked, submit an explanation or ask to speak with the Director of Study Abroad at _____

Name of Judicial Officer on Your Home Campus

Phone Number for Judicial Officer

Email Address for Judicial Officer

Fax Number for Judicial Officer

Please give your consent by agreeing with your signature to the statement below.

Under the provisions of the Family Education Rights and Privacy Act, I authorize the judicial affairs officer named above to provide documentation and discuss all information related to any judicial affairs review on the campus at which I am matriculated with the appropriate Study Abroad Office staff members and, if appropriate, with the associated faculty program director, for the purpose of determining my participation in a study abroad program.

Student Signature

Date Release Signed

Date This Release Expires and Is No Longer Valid. (Recommended: End of the semester in which you will be studying abroad)

II. To Be Completed by the Judicial Affairs Officer

Student's Last Name

Student's First Name

1. _____ The student named above and on the reverse side of this form **has not received** a judicial sanction (probation or higher) on our campus.
2. _____ The student named above and on the reverse side of this form **has received** a judicial sanction (probation or higher) on our campus.

Effective Dates: _____

Level of Sanction: _____

Violation: _____

Printed Name of Individual Authorized to Complete This Form

Signature

Title

Date

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Please return both pages of this form directly to the Study Abroad Office at:

Alfred State; SUNY College of Technology
Attn: Study Abroad/ International Education Office
10 Upper College Drive
Alfred, New York 14802

Email: studyabroad@alfredstate.edu
Fax: (607)587-3207